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Fill in this information to identify your case:		
United States Bankruptcy Court for the:  Northern District of: Illinois (State)		
Case number (if known)	Chapter you are filing under:	
	Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	William	
	First name	First name
Write the name that is on your government-issued	_E	
picture identification (for	Middle name	Middle name
example, your driver's license or passport	Jones Last name	Last name
	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the	First name	First name
last 8 years		
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	Last Hame	Last Hallie
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4	XXX - XX- 7647	xxx - xx-
digits of your Social Security		
number or federal	OR	OR
Individual Taxpayer Identification	9 xx - xx-	9 xx - xx-
number (ITIN)		

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Debtor 1 William First Name	E Middle Name	Jones Last Name	Case number (if known)	
i list ivallie	Widdle Name	Lastivanie		
	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint	Case):
4. Any business names and Employer	✓ I have not used any busin	ness names or EINs.	I have not used any business names or EINs.	
Identification Numbers (EIN) you have used in the	Business name		Business name	
last 8 years	Business name		Business name	
Include trade names and doing business as names	EIN		EIN	
	EIN		EIN	
5. Where you live	3088 Hillbrook Ln Apt 202		If Debtor 2 lives at a different address:	
	Number Street		Number Street	
	Aurora Illinois	60502		
	City State Kane	Zip Code	City State Zip Code	
	County		County	
		lifferent from the one above, urt will send any notices to you at	If Debtor 2's mailing address is different from you in here. Note that the court will send any notices to the address.	
	Number Street		Number Street	
	City State	e Zip Code	City State Zip Cod	<u> </u>
6. Why you are	Check one:		Check one:	
choosing this district to file for bankruptcy		pefore filing this petition, I have er than in any other district.	Over the last 180 days before filing this petition, I lived in this district longer than in any other distr	
	I have another reason. E	explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §	§ 1408.)

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Debtor 1 Willian First Nai		K Marine Kr	20	Jones Lost Nome	Case number (if know	<u></u>
		Middle Nam out Your Bankr		Last Name		
7. The chapt Bankrupto you are ch file under	cy Code noosing to			f each, see <i>Notice Required</i> and check the appropriate bo	-	(b) for Individuals Filing for Bankruptcy (Form
8. How you we the fee	will pay	court for mo may pay wi on your beh  I need to pay Individuals to By law, a just less than 15 the fee in in	ore details about the cash, cashidalf, your attornay the fee in it to Pay Your Filinat my fee be added may, but it 50% of the offinstallments). If	ut how you may pay. Ter's check, or money oney may pay with a cre  nstallments. If you ching Fee in Installments ( waived (You may requise not required to, waived poverty line that apprents of the control of the cont	Typically, if you order If your a dit card or checoose this option (Official Form 1) test this option e your fee, and oplies to your fan, you must fill or the property of the control	only if you are filing for Chapter 7. may do so only if your income is amily size and you are unable to pay out the <i>Application to Have the</i>
9. Have you bankrupto the last 8 y	y within	✓ No.  Yes. District  District		WhenWhenWhen	MM/DD/YYYY  MM/DD/YYYY	Case number  Case number  Case number
10. Are any bacases pendering filed spouse wifiling this you, or by business by an affil	ding or d by a ho is not case with a partner, or	✓ No.  Yes. Debtor District Debtor District		<u>W</u> hen <u>W</u> hen	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11. Do you re residence	-	✓ No	ur landlord obtained Go to line 12.	I an eviction judgment against atement About an Eviction Jud petition.		

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Debtor 1 William First Name		E Midd	dle Name	Jones Last Name	Case numbe	er (if known)		
Part 3: Report About An	y Bus				r			
12. Are you a sole proprietor of any full- or part-time business?	<b>☑</b>	No. Yes.	Go to Part 4.  Name and location of b	ousiness				
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.  If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Single Asset Re Stockbroker (as	Street  Street	in 11 U.S.C. § 101(27 ned in 11 U.S.C. § 101	**	nde	
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	dead opera	llines. If y ations, ca	ou indicate that you are	a small business de	ebtor, you must attach j	your most recent ba	o that it can set appropriate alance sheet, statement of t exist, follow the procedure	
For a definition of small business debtor, see 11 U.S.C. § 101(51D).		No. No. Yes.	I am not filing under Cl I am filing under Chapt Bankruptcy Code. I am filing under Chapt	ter 11, but I am NC			ne definition in the nition in the Bankruptcy Coc	de.
Part 4: Report if You Ow	n or l	Have A	Any Hazardous Pr	operty or Any	Property That No	eeds Immediat	te Attention	
14. Do you own or have any property that poses or is alleged to pose a threat of	✓	No. Yes.	What is the hazard?					
imminent and identifiable hazard to public health or			If immediate attention is	needed, why is it no	eeded?			
safety? Or do you own any property that needs immediate attention?		•	Where is the property?	Number	Street			
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	S	tate	Zip Code	

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Debtor 1 William E Jones Case number (if known)

#### First Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of

credit counseling with the court.

credit counseling with the court.

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Debtor 1 William First Name	E Middle Name	Jones Case nu Last Name	mber (if known)			
	restions for Reporting Purpo					
16. What kind of debts do you have?	<ul> <li>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.</li> <li>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17.</li> <li>16c. State the type of debts you owe that are not consumer debts or business debts.</li> </ul>					
17. Are you filing under Chapter 7?  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  No. I am not filing under Chapter 7. Do you estimate that after any exempt propert paid that funds will be available to distribute to unsecured creditors?  No. I am not filing under Chapter 7. Do you estimate that after any exempt propert paid that funds will be available to distribute to unsecured creditors?						
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000			
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 mill \$10,000,001-\$50 mill \$50,000,001-\$100 n \$100,000,001-\$500	llion \$1,000,000,001-\$10 billion sillion \$10,000,000,001-\$50 billion			
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 mill \$10,000,001-\$50 mill \$50,000,001-\$100 n \$100,000,001-\$500	llion \$1,000,000,001-\$10 billion sillion \$10,000,000,001-\$50 billion			
Part 7: Sign Below						
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  **  /s/William Jones Signature of Debtor 1  Executed on					

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Debtor 1	William	E	Jones	Case number	(if known)
	First Name	Middle Name	Last Name		
you are by one If you a represe	er attorney, if represented are not ented by an y, you do not	eligibility to proceed ur the relief available und to the debtor(s) the no	nder Chapter 7, 11, 1 der each chapter for tice required by 11 U	2, or 13 of title 11, U which the person is .S.C. § 342(b) and, i	that I have informed the debtor(s) about United States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, nation in the schedules filed with the
	file this page.	/s/ Mary E.R. Walte Signature of Attorney		Date	11/11/2016 MM / DD / YYYY
		Mary E.R. Walters Printed name Semrad Law Firm Firm name			
		1444 N. Farnsworth A Street Suite 300	venue		
		Aurora City		Illinois State	60505 Zip Code
		Contact phone	3124477861	Email address	mwalters@semradlaw.com
		6315822 Bar number		Illino Stat	

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Fill in this information to identify your case:						
Debtor 1	William First Name	E Middle Name	Jones Last Name			
Debtor 2 (Spouse, if filing	) First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	Northern	District of Illinois(State)			
Case number (If known)	-		(Oldio)			

Check if this is an
amended filing

12/15

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	<b>Your assets</b> Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$33,553.04
1c. Copy line 63, Total of all property on Schedule A/B	\$33,553.04
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	\$46,856.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$35,726.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$55,048.01
Your total liabilities	\$137,630.01
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$7,069.23
Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22, Column A, of Schedule J	\$4,244.00

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Deb	tor 1	William	E	Jones	Case nu	ımber (if known)					
		First Name	Middle Name	Last Name							
Part	4: /	Answer These Questi	ons for Administ	rative and Statistical R	ecoras			_			
6. <b>A</b>	6. Are you filing for bankruptcy under Chapters 7, 11, or 13?										
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.										
[	✓ Yes.										
7. <b>W</b>	7. What kind of debt do you have?										
[	_			mer debts are those incurred b out lines 8-10 for statistical pu		•					
		our debts are not primarily is form to the court with you		ou have nothing to report on this	s part of the form.	Check this box and submi	it				
		the Statement of Your C 122A-1 Line 11; OR, Form 1	•	<b>ne:</b> Copy your total current mo n 122C-1 Line 14.	onthly income fron	n Official	\$10,709.47				
9.	Сор	y the following special ca	tegories of claims fro	m Part 4, line 6 of Schedule	E/F:						
	Fror	m Part 4 on Schedule E/F,	copy the following:			Total claim					
	9a. [	Domestic support obligation	s (Copy line 6a.)			\$0.00					
	9b. 7	Taxes and certain other debts	s you owe the governme	ent. (Copy line 6b.)		\$35,726.00					
	9c. C	Claims for death or personal	injury while you were in	ntoxicated. (Copy line 6c.)		\$0.00					
9d. Student loans. (Copy line 6f.) \$17,117.00											
9e. Obligations arising out of a separation agreement or divorce that you did not report as \$0.00											
	prior	ity claims. (Copy line 6g.)				\$0.00					
	9f. D	ebts to pension or profit-sha	aring plans, and other s	similar debts. (Copy line 6h.)		ψο.συ					
	9a	<b>Fotal.</b> Add lines 9a through	9f.			\$52 843 00					

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Fill in this i	information to identify your case:	:			
Debtor 1	William	E	Jones		
	First Name	Middle Name	-		
Debtor 2					
(Spouse, if	f filing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	Northern	District of Illinois		
			(State)		
Case num (If known)	nber				
<u> </u>					Check if this is an
Officia	al Form 106A/B				amended filing
Sched	dule A/B: Prope	rtv			12
	<b>.</b>		sset only once. If an asset fits in more that	n and actoriony list the acc	ot in the
vrite your	name and case number (if kno	own). Answer every o	e is needed, attach a separate sheet to this puestion. d, or Other Real Estate You Own o		
1. Do you	, , , ,	itable interest in any	residence, building, land, or similar prope	erty?	
✓	No. Go to Part 2				
	Yes. Where is the property?				
		Wh	at is the property? Check all that apply.		claims or exemptions. Put ed claims on <i>Schedule D</i> :
1.1	Street address, if available, or o	other description	Single-family home		aims Secured by Propert
		H	Duplex or multi-unit building Condominium or cooperative	Current value of the	Current value of the
		H	Manufactured or mobile home	entire property?	portion you own?
		П	Land		
	Number Street		Investment property	Describe the nature of interest (such as fee s	
	City State	Zip Code	Timeshare Other	the entireties, or a life	
	City State	Zip Code		Ohaali if thia is sa	
			o has an interest in the property? Check	(see instructions)	mmunity property
		one	Debtor 1 only		
		H	Debtor 2 only		
		H	Debtor 1 and Debtor 2 only		
		П	At least one of the debtors and another		
		Oth pro	ner information you wish to add about this perty identification number:	item, such as local	
If you c	own or have more than one, list he			<b>D</b>	
1.2			at is the property? Check all that apply.  Single-family home		claims or exemptions. Put ed claims on <i>Schedule D:</i>
1.4	Street address, if available, or o	other description	Duplex or multi-unit building		aims Secured by Property
		H	Condominium or cooperative	Current value of the	Current value of the
			Manufactured or mobile home	entire property?	portion you own?

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1 and Debtor 2 only

property identification number:

Who has an interest in the property? Check

At least one of the debtors and another

Other information you wish to add about this item, such as local

Investment property

Timeshare Other \_\_\_\_

Debtor 1 only Debtor 2 only Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property (see instructions)

Number

City

Street

State

Zip Code

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Debtor 1	The state of the s	E Middle Name	Jones Last Name	_ Case number	(if known)	
1.3Stre	First Name eet address, if available, or o	Middle Name  ther description   Zip Code	Jones Last Name  What is the property? Check all that application of the property of the prope		Do not deduct secured cl the amount of any secure	d claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  your ownership mple, tenancy by estate), if known.
you ha Part 2: Do you own the	Describe Your Vehicles, or have legal or at someone else drives. If yours, trucks, tractors, sport utilities.	es equitable interest is to lease a vehicle, als	At least one of the debtors and another Dither information you wish to add altoroperty identification number:  all of your entries from Part 1, including the common state of the common s	ing any entries	for pages	
Ye 3.1	Make Model: Year: Approximate mileage: Other information: 2008 Lexus IS250	Lexus IS250 2008 127000	Who has an interest in the prope one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and at	nother	Do not deduct secured of the amount of any secure Creditors Who Have Classian Current value of the entire property?  \$11425.00	
3.2	Make Model: Year: Approximate mileage: Other information: 2014 Nissan Pathfinder	Nissan Pathfinder 2014 64000	instructions)  Who has an interest in the proper one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an Check if this is community prinstructions)	erty? Check	Do not deduct secured of the amount of any secure Creditors Who Have Classian Current value of the entire property?  \$19675.00	

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Debtor 1	William	E	Jones	Case number	(if known)	
	First Name	Middle Name	Last Name			
3.3	Make		Who has an interest in the pr	roperty? Check		claims or exemptions. Put
	Model: Year:		one.		•	red claims on Schedule D: laims Secured by Property.
	Approximate mileage:		Debtor 1 only		Creditors virio riave Ci	airis Secured by Froperty.
			Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
	Other information:		Debtor 1 and Debtor 2 only		entire property:	portion you own:
			At least one of the debtors ar			
			Check if this is community instructions)	y property (see		
3.4	Make		Who has an interest in the pr	roperty? Check		claims or exemptions. Put
	Model: Year:		one.		•	red claims on Schedule D: laims Secured by Property.
	Approximate mileage:		Debtor 1 only		Creditors virio riave Ci	airns Secured by Froperty.
			Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?
			At least one of the debtors ar			
			Check if this is communit instructions)	y property (see		
4.1	Yes Make		Who has an interest in the pr	operty? Check	Do not deduct secured	claims or exemptions. Put
4.1	Model:		who has an interest in the prone.	operty? Check		red claims or exemptions. Put red claims on <i>Schedule D:</i>
	Year:		Debtor 1 only			laims Secured by Property.
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?
			At least one of the debtors ar	nd another		<del></del>
			Check if this is communit	y property (see		
			instructions)			
4.2	Make		Who has an interest in the pr	operty? Check	Do not deduct secured	claims or exemptions. Put
	Model:		one.	-	•	red claims on <i>Schedule D:</i>
	Year:		Debtor 1 only		Creditors Who Have Co	laims Secured by Property.
	Approximate mileage:		Debtor 2 only		Current value of the	
	Other information:		Debtor 1 and Debtor 2 only		entire property?	Current value of the
	Otrici illionnation.				entire property:	Current value of the portion you own?
	Outer information.		At least one of the debtors ar	nd another	————	
	Circi montation.		At least one of the debtors ar  Check if this is communit instructions)			

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William Debtor 1 Jones Case number (if known) First Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used furniture & household goods \$900.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... used electronics \$700.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **√** No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **√** No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ✓ Yes. Describe... 22 marlin rifle \$200.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ✓ Yes. Describe... used clothing & shoes \$650.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver **✓** No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses **✓** No Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **√** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2450.00 for Part 3. Write that number here

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Deb	First Name	Middle Name	Last Name	Case number (# known)	_
Part		Financial Assets	Last Name		
		any legal or equitable int	erest in any of the follow	ving?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	✓ No	ve in your wallet, in your home, in a		en you file your petition  Cash:	
17.	Examples: Checking, sa	avings, or other financial accounts stitutions. If you have multiple acco		credit unions, brokerage houses,	
		17.1. Checking account:	USAA Bank		\$3.04
		17.2. Checking account:			
		17.3. Savings account:			
		<ul><li>17.4. Savings account:</li><li>17.5. Certificates of deposit:</li></ul>			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.		or publicly traded stocks investment accounts with brokerag	ge firms, money market accounts		
19.	Non-publicly traded s an LLC, partnership,	•	ated and unincorporated busin		_
	Yes. Give specific information about them	Name of entity		% of ownership:	

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Deb	tor 1	William	E	Jones	Case number (if known)	
20.	Neg	gotiable instruments ir	Middle Name  orate bonds and other negoticular personal checks, cashiers	d' checks, promissory notes,	and money orders.	
	Nor	No	nts are those you cannot transfe	r to someone by signing or c	lelivering them.	
		Yes. Give specific information about them	Issuer name:			
						_
21.		irement or pension imples: Interests in IR		o), thrift savings accounts, or	other pension or profit-sharing plans	_
		No Van Liet anah	Type of account:	Institution name:		
	Y	Yes. List each account	401(k) or similar plan:	Pension through US Mili	tary	\$0.00
		separately.	Pension plan:	pension through Chicago	Public Schools	\$0.00
			IRA:			
			Retirement account:			_ 
			Keogh:			_
			Additional account:			_
			Additional account:			_
22.	You	imples: Agreements v npanies, or others	orepayments deposits you have made so that y with landlords, prepaid rent, publ	ou may continue service or u ic utilities (electric, gas, wate Institution name:	se from a company er), telecommunications	_
		No Yes	Flactain	msuluion name.		
		103	Electric:			
			Gas:			
			Heating oil:  Security deposit on rental unit:			_
			Prepaid rent:			_
			Telephone:			_
			Water:			
			Rented furniture:			
			Other:			_
23.	Anr	nuities (A contract for	a periodic payment of money to	you, either for life or for a nu	mber of years)	_
	<b>✓</b>	No		•	, ,	
		Yes	Issuer name and description:			
						_

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Debte	or 1 William First Name	E Middle	Name	Jones Last Name	Case number (if known)	
24.	Interests in a		ount in a qualified		der a qualified state tuition program	•
	✓ No ☐ Yes	Institution name and descrip	tion. Separately file t	he records of any interest	ts.11 U.S.C. § 521(c):	
25.		able or future interests in per your benefit	property (other tha	n anything listed in line	e 1), and rights or powers	
	✓ No  Yes. Desc	ribe				
26.		rights, trademarks, trade s			ements	_
	✓ No  Yes. Desc	ribe				
27.		nchises, and other general ding permits, exclusive licen		sociation holdings, liquor	licenses, professional licenses	
	✓ No  Yes. Desc	ribe				
						1
Mon	ney or prope	erty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
						portion you own?
	Tax refunds ov					portion you own? Do not deduct secured
	Tax refunds ov	wed to you				portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ov  No Yes. Give s about you a	wed to you specific information them, including whether lready filed the returns				portion you own? Do not deduct secured
	Tax refunds ov  No Yes. Give s about you a	wed to you specific information t them, including whether			Federal:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds on  No Yes. Give s about you a and th	wed to you  specific information t them, including whether lready filed the returns ne tax years	oousal support, child	support, maintenance, div	Federal: State:	portion you own?  Do not deduct secured claims or exemptions.  \$0.00
28.	Tax refunds on  No Yes. Give s about you a and th	wed to you  specific information t them, including whether lready filed the returns ne tax years	oousal support, child	support, maintenance, div	Federal: State: Local: vorce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and th  Family suppor Examples: Past	wed to you  specific information t them, including whether lready filed the returns ne tax years	oousal support, child	support, maintenance, div	Federal: State: Local:	portion you own?  Do not deduct secured claims or exemptions.  \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and th  Family suppor Examples: Past	wed to you  specific information them, including whether lready filed the returns ne tax years  t due or lump sum alimony, sp	ousal support, child	support, maintenance, div	Federal: State: Local: vorce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and th  Family suppor Examples: Past	wed to you  specific information them, including whether lready filed the returns ne tax years  t due or lump sum alimony, sp	oousal support, child	support, maintenance, div	Federal: State: Local:  Vorce settlement, property settlement  Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and th  Family suppor Examples: Past	wed to you  specific information them, including whether lready filed the returns ne tax years  t due or lump sum alimony, sp	oousal support, child	support, maintenance, div	Federal: State: Local:  Vorce settlement, property settlement  Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds on  ✓ No  ☐ Yes. Give s about you a and th  Family suppor Examples: Past ✓ No ☐ Yes. Give s  Other amounts	wed to you  specific information them, including whether lready filed the returns ne tax years  t due or lump sum alimony, sp specific information			Federal: State: Local:  Vorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds on  ✓ No  ☐ Yes. Give s about you a and th  Family suppor Examples: Past ✓ No ☐ Yes. Give s  Other amounts Examples: Unpa	wed to you  specific information them, including whether lready filed the returns ne tax years  t due or lump sum alimony, sp specific information	ce payments, disabili	ty benefits, sick pay, vacat	Federal: State: Local:  Vorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds on  ✓ No  ☐ Yes. Give s about you a and th  Family suppor Examples: Past ✓ No ☐ Yes. Give s  Other amounts Examples: Unpa	wed to you  specific information them, including whether lready filed the returns ne tax years  t due or lump sum alimony, sp specific information	ce payments, disabili	ty benefits, sick pay, vacat	Federal: State: Local:  Vorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds on  ✓ No  ☐ Yes. Give s about you a and th  Family suppor Examples: Past ✓ No ☐ Yes. Give s  Other amounts Examples: Unpa	specific information them, including whether lready filed the returns ne tax years  t due or lump sum alimony, specific information	ce payments, disabili	ty benefits, sick pay, vacat	Federal: State: Local:  Vorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	otor 1 William E	Jones	Case number (if known)	
	First Name Middle Nam	ne Last Name		
31.	Interests in insurance policies  Examples: Health, disability, or life insurance; he	ealth savings account (HSA); credit, hom	eowner's, or renter's insurance	
	<ul><li>No</li><li>✓ Yes. Name the insurance company</li></ul>	Company name:	Beneficiary:	Surrender or refund value:
	of each policy and list its value	life insurance through CPS	dependents	\$0.00
		term life through employer	dependents	\$0.00
32.	Any interest in property that is due you from If you are the beneficiary of a living trust, expect property because someone has died.		are currently entitled to receive	
	✓ No			
	Yes. Describe			
33.	Claims against third parties, whether or not Examples: Accidents, employment disputes, ins		mand for payment	
	No	diamoc diamo, or rights to due		
	Yes. Describe			
34.	Other contingent and unliquidated claims of to set off claims	of every nature, including counterclai	ms of the debtor and rights	
	✓ No			
	Yes. Describe			
35.	Any financial assets you did not already list			
	✓ No			
	Yes. Describe			
36.	Add the dollar value of all of your entries fro Fart 4. Write that number here			\$3.04
	TOT T dit 4. Write that number here			
Par	•			in Part 1.
37.		nterest in any business-related proper		Current value of the
	✓ No. Go to Part 6.  Yes. Go to line 38.		<b>p</b>	ortion you own? On not deduct secured claims or exemptions
38.	Accounts receivable or commissions you all	ready earned		
	✓ No			
	Yes. Describe			
20	Office equipment furnishings and cumplic	•		
39.	Office equipment, furnishings, and supplie Examples: Business-related computers, software		es, rugs, telephones, desks, chairs, electro	nic devices
	✓ No			
	Yes. Describe			

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Deb	tor 1	William	E Middle Nesse	Jones	Case number (if known)	
40.	Ma	First Name  chinery, fixtures, eq	Middle Name	Last Name use in business, and tools of	vour trade	
٦٥.	<b>√</b>		juipinent, supplies you	use in business, una tools of	your rado	
	H	Yes. Describe				]
	ш	100. 20001150				
44						
41.		entory				
	뇓	No				1
	Ш	Yes. Describe				
		· '				1
42.			ips or joint ventures			
	✓	No		Name of entity:	% of ownership:	
		Yes. Give specific		rvarrie or entity.	% of ownership.	
		information about them				<u> </u>
						<u> </u>
43. (	Cust	tomer lists, mailing	lists, or other compilat	ions		
	<b>✓</b>	No				
		Yes. Do your lists in	clude personally identifiab	ole information (as defined in 11 l	U.S.C. § 101(41A))?	
		□ No				
		Yes. Desc	ribe			
		_				
44.	Any	y business-related	property you did not alre	eady list		
	$\mathbf{A}$	No				
	Ш	Yes. Give specific information				
		illomation				
						<u> </u>
				art 5, including any entries fo		
IOI P	art 5	_				
Part	6:		Farm- and Commeron interest in farmland, list it		perty You Own or Have an Interest	i In.
46.	Dο			erest in any farm- or commerc	cial fishing-related property?	
10.	_		my logar or oquitable me	order in any ranni or deminer	oral norming rotation property .	Current value of the
		Yes. Go to line 47.				portion you own?
	ш	163. 00 to line 47.				Do not deduct secured claims
						or exemptions
47.		rm animals	ultry form roised fish			
	ĽΧċ	•	ultry, farm-raised fish			
		No No Bassila				7
	Ш	Yes. Describe				
						*

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Debt	tor 1 William First Name	E Middle Name	Jones	Case number (if known)	
48.	Crops-either growing		Last Name		
40.	_	or narvesteu			
	✓ No				
	Yes. Describe				
	-			·	
49.	Farm and fishing equi	pment, implements, machinery, f	ixtures, and tools of trad	e	
	✓ No				
	Yes. Describe				
50.	Farm and fishing supp	lies, chemicals, and feed			
	<b>✓</b> No				
	Yes. Describe				
51.	Any farm- and comme	rcial fishing-related property you	did not already list		
	✓ No		•		
	Yes. Describe				
		l of your entries from Part 6, inclu			
101 F	art o. write that number	Here			
Part	7. Doscribo All Br	operty You Own or Have ar	Interest in That Vo	u Did Not List Abovo	
		perty fou Own of Have an		J DIG NOT LIST ABOVE	
00.		s, country club membership	<b></b> ,		
	✓ No				
	Yes. Give specific				
	information				
				_	
54. A	dd the dollar value of al	l of your entries from Part 7. Writ	e that number here		
Part	8: List the lotals	of Each Part of this Form			
55. <b>F</b>	Part 1: Total real estate,	line 2		<b>&gt;</b>	
<b>50</b>		_			<del></del>
56. <b>F</b>					
	part 2 total vehicles, line		\$31100.00	_	
57. <b>P</b>		d household items, line 15	\$31100.00 \$2450.00	 _	
		d household items, line 15		 	
58. <b>P</b>	art 3: Total personal an	d household items, line 15 ets, line 36	\$2450.00	<del>_</del>  	
58. <b>P</b>	art 3: Total personal an art 4: Total financial ass Part 5: Total business-re	d household items, line 15 ets, line 36	\$2450.00		
58. <b>P</b> 59. <b>F</b> 60. <b>F</b>	art 3: Total personal an art 4: Total financial ass Part 5: Total business-re	d household items, line 15 lets, line 36 elated property, line 45 shing-related property, line 52	\$2450.00		
58. <b>P</b> 59. <b>F</b> 60. <b>F</b> 61. <b>F</b>	art 3: Total personal an art 4: Total financial assets of the series of	d household items, line 15 lets, line 36 lated property, line 45 shing-related property, line 52 lety not listed, line 54	\$2450.00 \$3.04		#00FF0.6
58. <b>P</b> 59. <b>F</b> 60. <b>F</b> 61. <b>F</b>	art 3: Total personal an art 4: Total financial assets of the series of	d household items, line 15 lets, line 36 elated property, line 45 shing-related property, line 52	\$2450.00 \$3.04	Copy personal property total ▶	+ \$33553.04
58. <b>P</b> 59. <b>F</b> 60. <b>F</b> 61. <b>F</b>	art 3: Total personal an art 4: Total financial assets of the series of	d household items, line 15 lets, line 36 lated property, line 45 shing-related property, line 52 lety not listed, line 54	\$2450.00 \$3.04	Copy personal property total ►	+ \$33553.04

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Fill in this information to identify your case:							
Debtor 1	William First Name	E Middle Name	Jones Last Name				
Debtor 2 (Spouse, if fili	ing) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		Northern	District of Illinois (State)				
Case number (If known)	r		(State)				

### Official Form 106C

### Check if this is an amended filing

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t1: Identify the Property You Claim	im as Exempt						
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)  For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption				
	Brief description: Used furniture & household goods Line from Schedule A/B: 06	\$900.00	\$900.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)				
	Brief description: used clothing & shoes Line from Schedule A/B: 11	\$650.00	\$650.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)				
3.	Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)  No  Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  No  Yes							

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William Debtor 1 Jones Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$700.00 **✓** description: \$700.00 used electronics 100% of fair market value, up to any applicable statutory limit Schedule A/B: 40 ILCS 5/8-244, 5/9-228, 5/14-147 Brief \$0.00 ✓ description: pension through 100% of fair market value, up to any **Chicago Public Schools** applicable statutory limit Line from Schedule A/B: 21 Brief 735 ILCS 5/12-704 \$0.00 **✓** description: Pension through US 100% of fair market value, up to any Military applicable statutory limit Line from Schedule A/B: 21 735 ILCS 5/12-1001(f) Brief \$0.00 **V** description: life insurance through 100% of fair market value, up to any **CPS** applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$3.04 description: **✓** \$3.04 **USAA Bank** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$200.00 **✓** description: \$200.00 22 marlin rifle 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 10 735 ILCS 5/12-1001(f) Brief \$0.00 description: **✓** \$0 term life through 100% of fair market value, up to any employer applicable statutory limit Line from

Schedule A/B:

31

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Fill in	this inform	nation to identify your case:	:				
Debto	or 1	William	E	Jones			
2020		First Name	Middle Name	Last Name			
Debto (Spou		First Name	Middle Name	Last Name			
Unite	d States B	ankruptcy Court for the:	Northern	District of Illinois			
Cooo	numbor			(State)			
(If kno	number own)						
Off	icial F	Form 106D					Check if this is a mended filing
Scl	hedu	le D: Credit	ors Who Hav	ve Claims Secur	ed by Pro	perty	12/1
Be as space and ca	complete is needed ase numb Do any cre	and accurate as possib d, copy the Additional Pa er (if known). editors have claims secu	le. If two married people a age, fill it out, number the red by your property? his form to the court with you	are filing together, both are equal entries, and attach it to this form or other schedules. You have nothing	ly responsible for so a. On the top of any	upplying correct informadditional pages, writ	
Part '	i: List	All Secured Claims					
2.	for each o	claim. If more than one cre		ed claim, list the creditor separately list the other creditors in Part 2. As g to the creditor's name.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	WFDS Creditor's		Describe the property the	hat secures the claim:	\$34,395.00	\$19,675.00	\$14,720.00
	IRVINE City Who owe Debte At lead anoth Check to a conducted bincurred	r Street  California 92623 State ZIP Code es the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and er ck if this claim relates community debt t was 10/1/2015	☐ Contingent☐ Unliquidated☐ Disputed☐ Nature of lien. Check all☐ An agreement you m car loan)☐ ☐ Contingent☐ Contingent☐ Check all☐ ☐	ade (such as mortgage or secured is tax lien, mechanic's lien) lawsuit ht to offset)			
2.2	Evansvil City Who ow Debt Debt At lea anoth Chec	second street er Street  le Indiana 47708 State ZIP Code es the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and her ck if this claim relates community debt	Contingent Unliquidated Disputed Nature of lien. Check all An agreement you m car loan)	that apply.  that apply.  ade (such as mortgage or secured s tax lien, mechanic's lien)  lawsuit  ht to offset)	\$12,461.00	\$11,425.00	\$1,036.00
		Add the dollar value of y	your entries in Column A	on this page. Write that	\$46,856.00		

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Fill in	this inforn	nation to identify your cas	e:									
Debt	or 1	William	E		Jones	3						
Debt	or 2	First Name	Middle Nan	ne	Last I	Name						
		g) First Name	Middle Nan	ne	Last I	Name	_					
Unite	ed States B	Sankruptcy Court for the:	Northern		District of I							
Case (If knd	number	-				State)	_					
Offi	cial F	orm 106E/F						ļ		CH	neck if this is a	ın amended filing
		ıle E/F: Cre	ditore Wk	ho	Have	Insacu	rΔ	d Clain	ne			
											DITY -1-1	12/15
party 106A/ that a	to any exe B) and on re listed in s in the be n).	e and accurate as possi ecutory contracts or un Schedule G: Executor in Schedule D: Creditor oxes on the left. Attach All of Your PRIORI	expired leases that on y Contracts and Une s Who Hold Claims the Continuation Pa	expir Sec age	d result in a cla red Leases (Off ured by Prope to this page. O	im. Also list exe icial Form 106G rty. If more spac	cutor ). Do e is n	y contracts or not include ar reeded, copy t	n <i>Sch</i> ny cre the Pa	edule A/E editors wit art you ne	3 <i>: Property</i> (C h partially se ed, fill it out,	Official Form cured claims number the
		editors have priority un										
		Go to Part 2.			,							
	listed, iden much as p Continuati	your priority unsecured hitify what type of claim it is lossible, list the claims in a ion Page of Part 1. If more splanation of each type of	s. If a claim has both pour alphabetical order acc e than one creditor ho	riority cordir olds a	/ and nonpriority ng to the crediton particular claim	amounts, list that 's name. If you ha , list the other cre	t claim ave m editors	here and show fore than two p	w both	n priority an	d nonpriority a	amounts. As
		, , ,,,	,				,			Total	Priority	Nonpriority
2.1	Illinois De	epartment of Human & Fa	amily Services							<b>claim</b> \$0.00	amount \$0.00	\$0.00
2.1		reditor's Name	army Corvioco		ist 4 digits of a hen was the de	ccount number		 n/a		Ψ0.00	ΨΟ.ΟΟ	
	Number	Street							.l.,			
				AS	Contingent	u file, the claim i	is: Cr	теск ан тпат ард	ory.			
	Springfie	eld Illinois	62701	F	Unliquidated							
	City Who inc	State curred the debt? Check	Zip Code	Ē	Disputed							
		tor 1 only	one.	Ту	- pe of PRIORIT	Y unsecured cla	im:					
	Debt	tor 2 only		<b>✓</b>	Domestic sup	port obligations						
	Debt	tor 1 and Debtor 2 only			Taxes and cer	tain other debts yo	ou owe	e the governme	ent			
	At lea	ast one of the debtors and	l another			ath or personal inj	jury wl	hile you were				
	Che debt	ck if this claim relates t	o a community	Г	intoxicated Other. Specify							
		aim subject to offset?			•							
	<b>✓</b> No	-										
	Yes											
2.2		ept of Revenue Creditor's Name		La	st 4 digits of a	ccount number				\$0.00	\$0.00	\$0.00
	Illinois De	epartment of Revenue P.C	D. Box 64338	W	hen was the de	ebt incurred?		n/a				
	Number	Street		As	of the date yo	u file, the claim i	is: Ch	neck all that app	oly.			
	-				Contingent							
	Chicago City	Illinois State	60664 Zip Code		Unliquidated							
	<u>W</u> ho inc	curred the debt? Check	'		Disputed							
		tor 1 only		Ту		Y unsecured cla	im:					
		tor 2 only		L	•	port obligations						
		tor 1 and Debtor 2 only	l anothor	¥		tain other debts yo		•	ent			
	=	ast one of the debtors and ck if this claim relates to		L	intoxicated	ath or personal inj	,	·				
	debt	t	o a community		Other. Specify							
	Is the cla	aim subject to offset?										
Off	id Favere	106E/E	Schodu	ılo E	/E: Craditors V	/ho Have Unsec	rurad	Claime				nage 1

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William Debtor 1 Jones Case number (if known) First Name Your PRIORITY Unsecured Claims - Continuation Page Part 1: Priority Total **Nonpriority** After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. claim amount amount Internal Revenue Service \$35,726.00 \$35,726.00 \$0.00 Last 4 digits of account number Priority Creditor's Name P.O. Box 7346 When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent 19101 Philadelphia Pennsylvania Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim relates to a community Other. Specify Is the claim subject to offset? **✓** No Yes Magee, Donna L \$0.00 \$0.00 \$0.00 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? 118 Easterling Brimage Dr Number Street As of the date you file, the claim is: Check all that apply. Contingent Mendenhall Mississippi 39114 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only ✓ Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim relates to a community Other. Specify\_ debt Is the claim subject to offset? **✓** No Yes Mississippi Department of Human Services \$0.00 \$0.00 \$0.00 Last 4 digits of account number Priority Creditor's Name Po Box 23094 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. MDHS/SDU Contingent 39225 Mississippi Unliquidated Jackson City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ✓ Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim relates to a community Other. Specify debt Is the claim subject to offset? **✓** No

Yes

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Debto		Jones Case number (if known)				
	First Name Middle Name	Last Name				
Part 2	List All of Your NONPRIORITY Unsecured Cla	aims				
3. I	Do any creditors have nonpriority unsecured claims against you?					
1	No. You have nothing to report in this part. Submit this form to	o the court with your other schedules.				
i	✓ Yes.					
		tical order of the creditor who holds each claim. If a creditor has more	than one priority			
	· · · · · · · · · · · · · · · · · · ·	ach claim listed, identify what type of claim it is. Do not list claims already in				
		editors in Part 3.If you have more than four priority unsecured claims fill out				
	Page of Part 2.	, ,				
			Total claim			
4.1	ACS/COLLEGE LOAN CORP		\$17,117.00			
7.1	Nonpriority Creditor's Name	Last 4 digits of account number 5551	Ψ17,117.00			
	10000 W Charleston Blvd Ste 200	When was the debt incurred?1/1/2007				
	Number Street	As of the date you file, the claim is: Check all that apply.				
		Contingent				
	Las Vegas Nevada 89135					
	City State Zip Code	Unliquidated				
	Who incurred the debt? Check one.  Debtor 1 only	Disputed				
		Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	✓ Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce				
	At least one of the debtors and another	that you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar				
	Is the claim subject to offset?	debts				
	✓ No	Other. Specify				
	Yes					
			<b>.</b>			
4.2	American Water Nonpriority Creditor's Name	Last 4 digits of account number	\$173.00			
	PO Box 94551	When was the debt incurred?n/a				
	Number Street	As of the date you file the plains in Check all that apply				
		As of the date you file, the claim is: Check all that apply.				
		Contingent				
	Palatine Illinois 60094	Unliquidated				
	City State Zip Code	Disputed				
	Who incurred the debt? Check one.  Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	Student loans				
	블					
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar				
	Check if this claim relates to a community debt	debts				
	Is the claim subject to offset?	✓ Other. Specify utilities				
	✓ No					
	Yes					
40	BankPlus		Φ4 00F 00			
4.3	Nonpriority Creditor's Name	Last 4 digits of account number	\$1,685.00			
	3100 N. State Street	When was the debt incurred?n/a				
	Number Street	As of the date you file, the claim is: Check all that apply.				
		Contingent				
	Jackson Mississippi 39216	Unliquidated				
	City State Zip Code Who incurred the debt? Check one.	Disputed				
	Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	Student loans				
	<b>≝</b> ′	Obligations arising out of a separation agreement or divorce				
	Debtor 1 and Debtor 2 only	that you did not report as priority claims				
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar				
	Check if this claim relates to a community debt	debts				
	Is the claim subject to offset?	✓ Other. Specify NSf Fees				
	✓ No					
	Yes					

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Debto	or 1 William E	Jones Case number (if known)	
		Last Name	
Part 2	Your NONPRIORITY Unsecured Claims - Cont	inuation Page	
	After listing any entries on this page, number them beginni	ing with 4.5, followed by 4.6, and so forth.	Total claim
4.4	Big Picture Loans	Last 4 digits of account number	\$565.00
	Nonpriority Creditor's Name P.O. Box 704	When was the debt incurred?	
	Number Street	<del></del>	
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Watersmeet Michigan 49969 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	Other. Specify payday loan	
	<u>✓</u> No		
	Yes		
4.5	CB INDIGO	- Last 4 digits of account number 0263	\$331.00
	Nonpriority Creditor's Name Po Box 4477	When was the debt incurred? 6/1/2016	
	Number Street	<del></del>	
	Bankcard Services	As of the date you file, the claim is: Check all that apply.  Contingent	
		Unliquidated	
	Beaverton Oregon 97076 City State Zip Code	— <b>=</b>	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	✓ Other. Specify <u>CreditCard</u>	
	✓ No		
	Yes		
4.6	Client Services Inc Nonpriority Creditor's Name	Last 4 digits of account number	\$193.64
	3451 Harry S. Truman Blvd.	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Saint Charles Missouri 63301	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one.  Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	'	Student loans	
	Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	Debtor 1 and Debtor 2 only	that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts  Other. Specify collection	
	Is the claim subject to offset?		
	Yes		

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William Debtor 1 Jones Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 CRDT FIRST \$1,050.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 8134 When was the debt incurred? 11/1/2011 Street Number As of the date you file, the claim is: Check all that apply. Contingent 44188 Cleveland Ohio Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify CreditCard **✓** No Yes CreditBox.com, L.L.C 4.8 \$3,473.75 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 800 Lee Street Suite 300 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60016 Des Plaines City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_\_ payday loan Is the claim subject to offset? **✓** No Yes FIRST PREMIER BANK \$197.00 Last 4 digits of account number Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 When was the debt incurred? 6/1/2016 Number Street As of the date you file, the claim is: Check all that apply. c/o Kelly Lukason Contingent 56302 Saint Cloud Minnesota Unliquidated State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ✓ Other. Specify CreditCard **✓** No

Yes

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William Debtor 1 Jones Case number (if known) First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 GENESIS BC/CELTIC BANK \$374.00 Last 4 digits of account number Nonpriority Creditor's Name 9 PARKWAY CTR STE 190 When was the debt incurred? 6/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent **PITTSBURGH** 15220 Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify CreditCard **✓** No l Yes 4.11 Greenline Loans \$483.22 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 507 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 59527 Montana <u>Hays</u> City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts ✓ Other. Specify payday loan Is the claim subject to offset? **✓** No Yes LVNV FUNDING LLC 4.12 \$1,217.00 Last 4 digits of account number Nonpriority Creditor's Name 544 Mulberry St Ste 800 When was the debt incurred? 2/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent 31201 Macon Georgia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ✓ Other. Specify 001 UnknownLoanType **✓** No

Yes

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Debtor	1 William E First Name Middle Name	Last Name  Case number (if known)	
Part 2:	<b>I</b>		
	After listing any entries on this page, number them begins	•	Total claim
4.13	MaxLend	— Last 4 digits of account number	\$491.86
-	Nonpriority Creditor's Name P.O Box 639	When was the debt incurred?	
	Number Street	<u>——</u>	
		As of the date you file, the claim is: Check all that apply.  Contingent	
	Parshall North Dakota 58770	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one.  Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	✓ Other. Specify <u>payday loan</u>	
	No		
	Yes		
4.14	MID AMERICA BANK & TRU Nonpriority Creditor's Name	Last 4 digits of account number	\$332.00
	P.O Box 89937 Number Street	When was the debt incurred? 8/1/2016	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Sioux Falls South Dakota 57109	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify <u>CreditCard</u>	
	Yes		
4.15	MILITARY STAR	Leat 4 digita of account number	\$6,545.00
	Nonpriority Creditor's Name 3911 S WALTON WALKER BLV	Last 4 digits of account number When was the debt incurred? 5/1/1993	Ψο,ο τοισο
	Number Street		
		As of the date you file, the claim is: Check all that apply.  Contingent	
	DALLAS Texas 75265 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	No	✓ Other. Specify <u>CreditCard</u>	
	Yes		

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William Debtor 1 Jones Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 MSDHS/METSS \$810.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 750 NORTH STATE ST When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent JACKSON Mississippi Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify InstallmentLoan **✓** No Yes **PIONEERMCB** 4.17 \$5,473.00 Last 4 digits of account number Nonpriority Creditor's Name 4000 S EASTERN AVE STE 3 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent LAS VEGAS 89119 Nevada Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify 036 InstallmentLoan **✓** No Yes 4.18 PORTFOLIO RC \$2,511.00 Last 4 digits of account number Nonpriority Creditor's Name 120 Corporate Boulevard When was the debt incurred? 3/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent Norfolk Virginia 23502 Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? 001 Collection; Collecting for **✓** No ORIGINAL CREDITOR: 08 CIT

Yes

Other. Specify

ONLINE BANK

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William Debtor 1 Jones Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** PORTFOLIO RC 4.19 \$482.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 120 Corporate Boulevard When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 23502 Norfolk Virginia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? **V** Collection; Collecting for **✓** No ORIGINAL CREDITOR: 08 Other. Specify CAPITAL ONE BANK USA N A Yes 4.20 Spotloan \$894.54 Last 4 digits of account number \_ Nonpriority Creditor's Name P.O. Box 927 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **Palatine** Illinois 60078 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt ✓ Other. Specify \_\_\_\_ payday loan Is the claim subject to offset? **✓** No Yes SPRINGLEAF FINANCIAL S 4.21 \$4,792.00 Last 4 digits of account number Nonpriority Creditor's Name 601 NW second street When was the debt incurred? 6/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent 47708 Evansville Indiana Unliquidated State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify 036 InstallmentLoan **✓** No

Yes

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Debtor		Jones	Case number (if known)	
	First Name Middle Name	Last Name		
Part 2:	Your NONPRIORITY Unsecured Claims - Cont	inuation Page	•	
	After listing any entries on this page, number them beginn	ning with 4.5, follo	owed by 4.6, and so forth.	Total claim
4.22	USAA SVG BK Nonpriority Creditor's Name 10750 MC DERMOTT	•	ts of account number 1156 the debt incurred? 6/1/2005	\$3,751.00
	Number Street		ate you file, the claim is: Check all that apply.	
	<del> </del>	Conting	• • •	
	SAN ANTONIO Texas 78288 City State Zip Code	Unliquid		
	Who incurred the debt? Check one.	Disputed	ed	
	≌ ′	Type of NO	NPRIORITY unsecured claim:	
	Debtor 2 only  Debtor 1 and Debtor 2 only	Student	tloans	
	At least one of the debtors and another		ions arising out of a separation agreement or o	divorce
	Check if this claim relates to a community debt	Debts to	o pension or profit-sharing plans, and other sir	milar
	Is the claim subject to offset?		Specify <u>CreditCard</u>	
	✓ No	Other. C	Specify Creditoria	
	Yes			
4.23	Zingo Cash	Last 4 digit	ts of account number 8765	\$2,106.00
	Nonpriority Creditor's Name 200 Fairway Drive	J	the debt incurred? 8/1/2016	
	Number Street			
			ate you file, the claim is: Check all that apply.	
	Vernon Hills Illinois 60061	Conting	gent	
	City State Zip Code	Unliquid	dated	
	Who incurred the debt? Check one.	Disputed	ed	
	Debtor 1 only	Type of NO	NPRIORITY unsecured claim:	
	Debtor 2 only	Student	loans	
	Debtor 1 and Debtor 2 only		ions arising out of a separation agreement or o	divorce
	At least one of the debtors and another		udid not report as priority claims	AIVOI C <del>C</del>
	Check if this claim relates to a community debt	Debts to debts	o pension or profit-sharing plans, and other sir	milar
	Is the claim subject to offset?	Other. S	Specify 13 InstallmentLoan	
	✓ No		. ,	
	Yes			

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Debtor 1	William	Е		Jones	Ca	se number (if known)
	First Name	М	iddle Name	Last Name		
Part 3:	List Others to	Be Notified A	About a Debt T	hat You Already	Listed	
col age	lection agency is tency here. Similarly	trying to collect to the trying to collect to the trying to collect to the trying trying to the trying try trying trying trying trying trying trying trying trying trying	from you for a deb re than one credit	ot you owe to someo or for any of the deb	ne else, list the	t you already listed in Parts 1 or 2. For example, if a e original creditor in Parts 1 or 2, then list the collection ted in Parts 1 or 2, list the additional creditors here. If I out or submit this page.
	tt & Gaines			On which entry	y in Part 1 or P	Part 2 did you list the original creditor?
<u>66</u>	1 Glenn Ave ımber Street			Line 4.12	of (Check one):	Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Wł Cit	neeling	Illinois State	60090 Zip Code	Last 4 digits o	f account nun	nber8937

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William Debtor 1 Jones Case number (if known) First Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$35,726.00 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$35,726.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$17,117.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. debts \$37,931.01 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$55,048.01 6j. Total. Add lines 6f through 6i.

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Fill in this information to identify your case:					
Debtor 1	William	Е	Jones		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing	I) First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois		
Case number (If known)			(State)		

### Official Form 106G

Check if this is ar
amended filing

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease			State what the contract or lease is for	
2.1	Apartments at Kirkland Crossing Name  3055 Riverbirch Dr			Residential Lease, Debtor is Lessee, month to month residential lease	
	Number Street				
	Aurora	Illinois	60502		
	City	State	Zip Code		

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Fill in thi	s information to identify your ca	ase:		
Debtor 1	l William	Е	Jones	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse	, if filing) First Name	Middle Name	Last Name	
United S	States Bankruptcy Court for the	Northern	District of Illinois	
			(State)	
Case nu (If known	-			
(**************************************	,			Check if this is an amended filing
Offic	ial Form 106H			
Saha	edule H: Your C	'adabtare		4045
Sche	dule n. four C	odebtors		12/15
1. Do y	• •	u lived in a community pro	perty state or territory?	codebtor.)  (Community property states and territories include Arizona, California,
ldah	no, Louisiana, Nevada, New Me	exico, Puerto Rico, Texas, Wa	shington, and Wisconsin.)	
	No. Go to line 3.			
Ш		spouse, or legal equivalent liv	ve with you at the time?	
	No	, atata ar tarritar , did yay liya	ь г	II in the name and current address of that name
	Yes. In which community	state or territory aid you live !	/ FI	ll in the name and current address of that person.
	Name of your spouse	former spouse, or legal equiv	valent	
	Number Street			<u> </u>
	Number Onest			
	City	State	Zip Co	de .
aga	in as a codebtor only if that	person is a guarantor or co	osigner. Make sure you	f your spouse is filing with you. List the person shown in line 2 have listed the creditor on Schedule D (Official Form 106D), edule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Official Form 106H Schedule H: Your Codebtors page 1

Column 1: Your codebtor

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			umem P	aye si (	)	
Fill in this in	nformation to identify	y your case:				
Debtor 1	William First Name	E Middle Name	Jones Last Nam	e	_	
Debtor 2					_	Check if this is:
(Spouse, if filin	g) First Name	Middle Name	Last Nam	е		An amended filing
United States E	Bankruptcy Court for the:	Northern	District of Illinoi	s	_	A supplement showing post-petition chapter 1: expenses as of the following date:
Case number			(State	e)		expenses as of the following date.
(If known)						MM / DD / YYYY
Official	Form 106I					
Schedu	le I: Your Inc	come				12/1:
	escribe Employme	ame and case numbe	r (if known). A	nswer eve	ery question	<b>.</b>
	in your employment		Debtor 1			Debtor 2
	ormation.  ou have more than one	Employment status	Employed  Not Emplo	oyed		Employed  Not Employed
	ach a separate page with ormation about additional	Occupation	Military instru	ctor		
em	ployers.	Employer's name	Chicago Publi	ic Schools Pa	yroll Services	
Incl or	lude part time, seasonal,	Employer's address	42 W Madisor	1		Number Street
self	-employed work.		- Number Street			Number Officer
	cupation may include dent					
	nomemaker, if it applies.		Chicago	Illinois	60602	
			City	State	Zip Code	City State Zip Code
		How long employed there?	3 years 3 mon	ths		
Estimate mo	ated.	date you file this form. If y	_			the space. Include your non-filing spouse unless on on the lines below. If you need more space,
	rate sheet to this form.	,.,.,			ebtor 1	For Debtor 2 or non-filing spouse
		ry, and commissions (befor alculate what the monthly wag			\$8,071.74	\$0.00

+ \$0.00

\$0.00

\$8,071.74

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

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First Name Middle Name Last Name  Copy line 4 here  5. List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions  5b. Mandatory contributions for retirement plans  5c. \$30.00  5c. Voluntary contributions for retirement plans  5c. \$30.00  5d. Required repayments of retirement fund loans  5d. Required repayments of retirement fund loans  5e. Insurance  5e. \$151.30  5g. Union dues  5h. Other deductions. Specify:  5h. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g  6h. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g  6h. List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly tay support payments that you, a non-filing spouse, or a dependent regularly received include cash assistance stellment. As a subject, child support, maintenance, dvorce settlement, and property settlement.  8c. \$30.00  5c. Sound \$0.00  5c. Family support payments that you, a non-filing spouse, or a dependent regularly received include cash assistance that you required the support sunder from the total monthly that income.  8c. \$0.00  5c. \$0.0	Debtor 1	1 William	E	Jones		Case number	r (if kno	wn)		
S. List all payroll deductions:   5a. Tax, Medicare, and Social Security deductions   5a.   \$1,914.47   \$0.00     5b. Mandatory contributions for retirement plans   5b.   \$322.88   \$0.00     5c. Voluntary contributions for retirement plans   5c.   \$0.00   \$0.00     5c. Required repayments of retirement fund loans   5d.   \$0.00   \$0.00     5d. Required repayments of retirement fund loans   5d.   \$0.00   \$0.00     5e. Insurance   5e.   \$151.30   \$0.00     5f. Domestic support obligations   5f.   \$878.32   \$0.00     5g. Union dues   5g.   \$0.00   \$0.00     5h. Other deductions. Specify:   5h.   \$0.00   \$0.00     5h. Other deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g   6.   \$3.266.97   \$0.00     5h. Other deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g   6.   \$3.266.97   \$0.00     5h. T. Calculate total monthly take-home pay. Subtract line 6 from line 4.   7.   \$4.804.78   \$0.00     8. List all other income regularly received:   8a. Net income from rental property and business, profession, or farm Attach a statement for each property and business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.   8a.   \$0.00   \$0.00		First Name	Middle Name	Last Name		For Debtor 1				
5. List all payroll deductions:       5a. Tax, Medicare, and Social Security deductions       5a. \$1,914.47       \$0,00         5b. Mandatory contributions for retirement plans       5b. \$322.88       \$0,00         5c. Voluntary contributions for retirement plans       5c. \$0.00       \$0,00         5c. Voluntary contributions for retirement fund loans       5d. \$0.00       \$0,00         5d. Required repayments of retirement fund loans       5d. \$0.00       \$0,00         5e. Insurance       5e. \$151.30       \$0,00         5f. Domestic support obligations       5f. \$878.32       \$0,00         5g. Union dues       5g. \$0.00       \$0,00         5h. Other deductions. Specify:       5h. \$0.00       \$0.00         5h. Other deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g       6. \$3,266.97       \$0.00         4c. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g       6. \$3,266.97       \$0.00         4c. But income from rental property and property and from operating a business, profession, or farm       Attach a statement for each property and from operating a business, profession, or farm       Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.       8a. \$0.00       \$0.00         8b. Interest and dividends       8b. \$0.00       \$0.00       \$0.00         8c. Family s	Copy	line 4 here		<b>→</b> 4	l	\$8,071.74		\$0.00		
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. \$3000 5c. Voluntary contributions for retirement plans 5c. \$0000 5c. Social Sequired repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. Sequired repayments of retirement fund loans 5d. Sequired repayments of retirement fund loans 5d. Social Sequired repayments find for more fund from operating a business, profession, or farm Attach a statement for each property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8a. \$0.00 \$0.00  8b. \$0.00  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, dvorce settlement, and property settlement.  8c. \$0.00 \$0.00  8d. Unemployment compensation 8d. \$0.00 \$0.00  8d. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify. Other Government Assistance Income  8f. \$0.00 \$0.00  8g. Social Security Soci										
5b. Mandatory contributions for retirement plans   5b.   \$322.88   \$0.00     5c. Voluntary contributions for retirement plans   5c.   \$0.00   \$0.00     5d. Required repayments of retirement fund loans   5d.   \$0.00   \$0.00     5e. Insurance   5e.   \$151.30   \$0.00     5f. Domestic support obligations   5f.   \$378.32   \$0.00     5g. Union dues   5g.   \$0.00   \$0.00     5h. Other deductions. Specify:   5h. + \$0.00   + \$0.00     6h. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g   6.   \$3.266.97   \$0.00     5h. Calculate total monthly take-home pay. Subtract line 6 from line 4.   7.   \$4.804.78   \$0.00     8l. List all other income regularly received:   8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.   8a.   \$0.00   \$0.00     8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include almony, spousal support, child support, maintenance, divorce settlement, and property settlement.   8c.   \$0.00   \$0.00     8d. Unemployment compensation   8d.   \$0.00   \$0.00     8e. Social Security   8e.   \$0.00   \$0.00     8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies   \$0.00   \$0.00   \$0.00				5	ā.	\$1,914.47		\$0.00		
Sc. Voluntary contributions for retirement plans   Sc.   \$0.00   \$0.00			•							
5d. Required repayments of retirement fund loans         5d.         \$0.00         \$0.00           5e. Insurance         5e.         \$151.30         \$0.00           5f. Domestic support obligations         5f.         \$878.32         \$0.00           5g. Union dues         5g.         \$0.00         \$0.00           5h. Other deductions. Specify:         5h. +         \$0.00         + \$0.00           6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g         6.         \$3.266.97         \$0.00           7. Calculate total monthly take-home pay. Subtract line 6 from line 4.         7.         \$4.804.78         \$0.00           8. List all other income regularly received:         8a. Net income from rental property and from operating a business, profession, or farm         Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.         8a.         \$0.00           8b. Interest and dividends         8b.         \$0.00         \$0.00           8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.         8c.         \$0.00         \$0.00           8d. Unemployment compensation         8d.         \$0.00         \$0.00         \$0.00           8e. Social Secur		•	•	5	īc.			\$0.00		
5e. Insurance         5e.         \$151.30         \$0.00           5f. Domestic support obligations         5f.         \$878.32         \$0.00           5g. Union dues         5g.         \$0.00         \$0.00           5h. Other deductions. Specify:         5h. +         \$0.00         +         \$0.00           6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g.         6.         \$3.266.97         \$0.00           4. List all other income regularly received:         8. List all other income regularly received:         \$0.00         \$0.00           8a. Net income from rental property and from operating a business, profession, or farm         Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.         8a.         \$0.00           8b. Interest and dividends         8b.         \$0.00         \$0.00           8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.         8c.         \$0.00           8d. Unemployment compensation         8d.         \$0.00         \$0.00           8e. Social Security         8e.         \$0.00         \$0.00           8f. Other government assistance that you regularly receive include cash assistance that you receive, such as food stampsy (b	5d. <b>R</b>	Required repay	ments of retirement fund loans	5	īd.	\$0.00	-	\$0.00		
5f. Domestic support obligations 5g. Union dues 5g. \$0.00 \$0.00  5h. Other deductions. Specify: 5h. + \$0.00 + \$0.00  6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g 6. \$3.266.97 \$0.00  7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$4.804.78 \$0.00  8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00 \$0.00  8d. Unemployment compensation 8d. \$0.00 \$0.00  8e. Social Security 8e. \$0.00 \$0.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: Other Government Assistance Income  8f. \$0.00 \$0.00	5e. <b>I</b> r	nsurance		5	ē.	-				
5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. + \$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. + \$0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$4,804.78 \$0.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00 \$0.00 8d. Unemployment compensation 8d. \$0.00 \$0.00  8e. Social Security 8e. \$0.00 \$0.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: Other Government Assistance Income  8f. \$0.00 \$0.00	5f. <b>D</b> e	omestic supp	ort obligations	5	ōf.		-	\$0.00		
5h. Other deductions. Specify: 5h. + \$0.00 + \$0.00   6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g   6. \$3,266.97   \$0.00    7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$4,804.78   80.00    8. List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends   8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00   \$0.00    8d. Unemployment compensation   8d. \$0.00   \$0.00    8e. Social Security   8e. \$0.00   \$0.00    8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: Other Government Assistance Income   8f. \$0.00   \$0.00   \$0.00			· ·	5	āg.					
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8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00 \$0.00  8d. Unemployment compensation  8d. \$0.00 \$0.00  8e. Social Security  8f. \$0.00 \$0.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies  Specify: Other Government Assistance Income  8f. \$0.00 \$0.00	6. Add t				S.		_			
8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00 \$0.00  8d. Unemployment compensation  8d. \$0.00 \$0.00  8e. Social Security  8e. \$0.00 \$0.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies  Specify: Other Government Assistance Income  8f. \$0.00 \$0.00	7. Calcu	ılate total mor	thly take-home pay. Subtract line 6 from line	e 4. 7	7.	\$4,804.78	_	\$0.00		
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8a. \$0.00 \$0.00  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00 \$0.00  8d. Unemployment compensation  8d. \$0.00 \$0.00  8e. Social Security  8e. \$0.00 \$0.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies  Specify: Other Government Assistance Income  8f. \$0.00 \$0.00	8. List a	II other incom	e regularly received:							
receipts, ordinary and necessary business expenses, and the total monthly net income.  8a. \$0.00 \$0.00  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00 \$0.00  8d. Unemployment compensation  8d. \$0.00 \$0.00  8e. Social Security  8e. \$0.00 \$0.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies  Specify: Other Government Assistance Income  8f. \$0.00 \$0.00	b	usiness, prof	ession, or farm	roop						
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00 \$0.00  8d. Unemployment compensation  8d. \$0.00 \$0.00  8e. Social Security  8e. \$0.00 \$0.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies  Specify: Other Government Assistance Income  8f. \$0.00 \$0.00	re	eceipts, ordinar	and necessary business expenses, and the t	total	Ba.	\$0.00	_	\$0.00		
dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00 \$0.00  8d. Unemployment compensation  8d. \$0.00 \$0.00  8e. Social Security  8e. \$0.00 \$0.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies  Specify: Other Government Assistance Income  8f. \$0.00 \$0.00	8b. <b>Ir</b>	nterest and di	vidends	8	Bb.	\$0.00		\$0.00		
8d. \$0.00 \$0.00  8e. Social Security  8e. \$0.00 \$0.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies  Specify: Other Government Assistance Income  8f. \$0.00 \$0.00	<b>d</b> In	lependent regi nclude alimony,	ularly receive spousal support, child support, maintenance,		20	\$0.00		\$0.00		
8e. \$0.00 \$0.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: Other Government Assistance Income  8f. \$0.00 \$0.00							_			
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: Other Government Assistance Income  8f. \$0.00 \$0.00			Compensation			-	_			
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies  Specify: Other Government Assistance Income  8f. \$0.00 \$0.00			ont assistance that you regularly receive		JC.	φ0.00	_	ψ0.00		
	Inc as the su	clude cash assi ssistance that yo e Supplementa ubsidies	stance and the value (if known) of any non-cas ou receive, such as food stamps (benefits und Il Nutrition Assistance Program) or housing	ler	nt.	\$0.00		\$0.00		
og. Fension of fetirement income og. 51.429.05 50.00										
8h. <b>Other monthly income.</b> Specify: 8h. + \$263.23 + \$0.00	ŭ				-					
		-			_		⁻⊨			
9. <b>Add all other income</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$1,692.26 \$0.00	9. Add a	all other incom	ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g	+ 8n. S	,. L	\$1,692.26		\$0.00		
10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse					l0.	\$6,497.04	+	\$0.00	=	\$6,497.04
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.	Includ relati									
Specify: 11. + \$0.00	Spec	ify:				-			11. +	\$0.00
									12.	\$7,069.24
Combined monthly income  13. Do you expect an increase or decrease within the year after you file this form?	13. <b>Do</b> v	ou expect an	increase or decrease within the year after	you file this fo	orm?					
No.		•	The second secon	,	- · •					
		7								
Yes. Explain:	Ш	res. Explain:								

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Debtor 1	William	E	Jones	Case	e number (if known)		
	First Name	Middle Name	Last Name				
Part 1:	Describe Employmen	t					
		Debtor 1			Debtor 2		
Employ	ment status	✓ Employed			Employed		
		Not Employed			Not Employed		
Occupa	ation						
Employ	er's name	CarMax Auto Superst	ores, Inc.				
Employ	er's address	12800 Tuckahoe Creel	k Parkway				
		Number Street	-		Number Street		
		Richmond	Virginia	23238			
		City	State	Zip Code	City	State	Zip Code
How lo	ng employed there?	1 year 4 months	_			_	

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Debtor 1 William E Jones Case number (if known)
First Name Middle Name Last Name

#### Part 2: Give Details About Monthly Income

	For Debtor 1	For Debtor 2 or non-filing spouse
8h.Other monthly income. Specify:		
1. Long Term Disability Income	\$0.00	\$0.00
2. VA Disability	\$263.23	\$0.00
3. CarMax Auto Superstores, Inc.	\$572.20	\$0.00

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Fill in this inform	nation to identify your c	ase:				
Debtor 1	William	E	Jones			
Dobio! !	First Name	Middle Name	Last Name			
Debtor 2				Check if this is:		
(Spouse, if filing	) First Name	Middle Name	Last Name	An amended filing	J	
United States B	ankruptcy Court for the	: Northern	District of Illinois (State)	A supplement sho	•	n chapter 13
Case number			()	oxponoco de el un	Jionownig dato.	
(If known)				MM / DD / YYYY		
Official I	Form 106J					
		vnoneoe				40/4
Scriedui	e J: Your E	xpenses				12/1
			e filing together, both are equally form. On the top of any addition			mher
	wer every question.	a, attach another sheet to this	orm. On the top of any addition	ai pages, write your nai	ne and case nu	IIIDCI
Part 1: Desc	ribe Your House	hold				
1. Is this a join						
✓ No. Go						
Yes. Do	es Debtor 2 live in a	separate household?				
	] No					
_	■ T Ves Debtor 2 must :	file Official Forms 106 L2 Evnen	ses for Separate Household of Deb	or 2		
2 Do you how			ses for Separate Flouseriold of Debi	Of Z.		
2. Do you have dependents?		No				
Do not list De Debtor 2.		Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does depend with you?	ent live
3. Do your exp		No				
than	people other					
yourself and	your 🗀	Yes				
dependents	?					
Part 2: Estir	nate Your Ongoin	g Monthly Expenses				
Estimate your	expenses as of your	bankruptcy filing date unless y	ou are using this form as a supplemental Schedule J, check the			ne
applicable dat	е.					
		n-cash government assistance			You	ır expenses
4. The rental	or home ownership e	xpenses for your residence. In	clude first mortgage payments and			\$1,884.00
	the ground or lot. 4.	,	9-9- p-7		4.	Ψ1,004.00
	ıded in line 4:					
4a. Real es	tate taxes				4a _	\$0.00
4b. Propert	y, homeowner's, or ren	ter's insurance			4b	\$36.00
4c. Home r	naintenance, repair, and	d upkeep expenses			4c	\$0.00
4d. Homeo	wner's association or c	ondominium dues			4d.	\$0.00

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Jones

Debtor 1

William Case number (if known) First Name Middle Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$230.00 6a. 6b. Water, sewer, garbage collection \$75.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$189.00 6c. 6d. Other. Specify: cellphone \$180.00 6d 7. Food and housekeeping supplies \$600.00 7. 8. Childcare and children's education costs \$85.00 8. 9. Clothing, laundry, and dry cleaning 9. \$120.00 10. Personal care products and services 10. \$105.00 11. Medical and dental expenses \$125.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$350.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$95.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$170.00 15d. Other insurance. Specify: \_\_\_ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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Debtor 1	William	Е	Jones	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	. Specify:				21	\$0.00
22. Calcu	late your monthly expenses.					\$4,244.00
22a. A	dd lines 4 through 21.					\$0.00
22b. C	Copy line 22 (monthly expenses for		\$4,244.00			
22c. A	dd line 22a and 22b. The result is	s your monthly expens	ses.		22.	
23.Calcu	late your monthly net income.					
23a. C	Copy line 12 (your combined mon	thly income) from Sch	edule I.		23a	\$7,069.23
23b. C	Copy your monthly expenses from	line 22 above.			23b	\$4,244.00
			••		230	
	lubtract your monthly expenses from the result is your monthly net inc		ne.		23c	\$2,825.23
	, , , , , , , , , , , , , , , , , , , ,				230	
24. <b>Do yo</b>	ou expect an increase or decre	ease in your expense	es within the year after you	ı file this form?		
For e	example, do you expect to finish p	aving for vour car loar	within the vear or do vou ex	pect your		
	gage payment to increase or dec					
<b>✓</b> N	lo					
	<b>(</b> 00					
, П	⁄es					
	Explain here:					

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Fill in this information to identify your case:									
Debtor 1	William	E	Jones	_					
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse, if filing	<sup>j)</sup> First Name	Middle Name	Last Name						
United States B	ankruptcy Court for the:	Northern	District of Illinois						
			(State)						
Case number (If known)			. ,	_					

### Official Form 106Dec

Check if this is a
amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below								
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
✓ No									
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).							
	Under penalty of perjury, I declare that I have read the summary at that they are true and correct.	nd schedules filed with this declaration and							
40	·	4.4							
X	7-57-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-	*							
	Signature of Debtor 1	Signature of Debtor 2							
	Date 11/11/2016	Date							
	MM/DD/YYYY	MM/DD/YYYY							

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Fill in this info	mation to identify your cas	e:	
Debtor 1	William	E	Jones
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filir	ng) First Name	Middle Name	Last Name
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)
Case number (If known)		_	(State)

Check if this is an amended filing

#### for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every

Part	art 1: Give Details About Your Marital Status and Where You Lived Before								
1.	What is your current marital status?								
	Married Not married								
2.	During the last 3 y								
	No ✓ Yes. List all of t	the places you	lived in the last 3 y	vears. Do not include where yo	ou live now.				
	Debtor 1:			Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there	
				Same as Debtor 1		Same as Debtor 1			
	429 Columbine Lane Number Street		From <u>07/2013</u> To 09/2016	Number Street			From To		
	Bolingbrook City	Illinois State	60440 Zip Code		City	State	Zip Code		
					Same as Debtor 1			Same as Debtor 1	
	Number Stree	t		From To	Number Str	eet		From To	
	City	State	Zip Code		City	State	Zip Code		
i	territories include Ariz	zona, Californi	a, Idaho, Louisiana	pouse or legal equivalent in a, Nevada, New Mexico, Puer ebtors (Official Form 106H).				mmunity property states and	

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Debtor 1         William         E           First Name         Middle Name			nes st Name	Case number (if kn	(if known)		
Dort	2.	1		ot raille			
	<b>Did</b> Fill i	you have any income from employmenthe total amount of income you receive vities. If you are filing a joint case and you not have. Fill in the details.	nent or from operating a ed from all jobs and all bu	isinesses, including pa	art-time	•	ears?
			Debtor 1	Debtor	Debtor 2		
			Sources of income Check all that apply.	Gross income (before deducti exclusions)		s of income I that apply.	Gross income (before deductions and exclusions)
		rom January 1 of current year until ne date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$89049.6	con bor	ges, nmissions, uses, tips erating a iness	
		or last calendar year: lanuary 1 to December 31, 2015 ) YYYY	Wages, commissions, bonuses, tips Operating a business	\$80000.00	con bor	ges, nmissions, uses, tips erating a iness	
		or the calendar year before that: lanuary 1 to December 31, 2014 ) YYYY	✓ Wages, commissions, bonuses, tips ☐ Operating a business	\$77000.00	con bor	ges, nmissions, uses, tips erating a iness	
! !	nclu bene case	you receive any other income during de income regardless of whether that income fift payments; pensions; rental income; in and you have income that you received each source and the gross income from No  Yes. Fill in the details.	come is taxable. Example nterest; dividends; money together, list it only once u	s of other income are collected from lawsui under Debtor 1.	alimony; child support ts; royalties; and gamb	ling and lottery winr	
			Debtor 1		Debto	2	
			Sources of income Describe below.	Gross incoleach source (before dedu exclusions)	e Describ	es of income e below.	Gross income from each source (before deductions and exclusions)
		From January 1 of current year until he date you filed for bankruptcy:	estimated pension	\$26,785	5.00		
		For last calendar year:  January 1 to December 31, 2015 )  YYYYY	estimated pension	\$29,220	0.00		
		For the calendar year before that:  January 1 to December 31, 2014 YYYYY	estimated pension	\$29,000	0.00		

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1 113	st Name		Middle Name	Jones Last Name	Case num	ber (if known)	
Lis	st Certain	Pavmen	its You Made F	Before You Filed for	Bankruptcy		
	or ourtain	i uyiiicii	no rou made i	301010 104 1 1104 101	Dankiuptoy		
e eith	er Debtor 1	's or Debto	or 2's debts prima	arily consumer debts?			
No.			<b>Debtor 2 has pri</b> I, family, or househ		Consumer debts are defined	l in 11 U.S.C. § 101(8) as "inci	urred by an individual
	During the	90 days bef	ore you filed for ba	nkruptcy, did you pay any ci	reditor a total of \$6,425* or m	ore?	
	No. Go	to line 7.					
	t	otal amoun	t you paid that cred	ditor. Do not include payme	5* or more in one or more pa nts for domestic support obli o an attorney for this bankru	gations, such as	
	* Subject to	adjustment	t on 4/01/19 and ev	very 3 years after that for ca	ses filed on or after the date	of adjustment.	
Yes.	. Debtor 1 c	or Debtor 2	or both have pri	marily consumer debts.			
			_	-	reditor a total of \$600 or more	<u> </u>	
	_			programs you pay ally of			
		to line 7.	I Pro s		or more and the total amount		
	t	hat creditor	. Do not include pa	ayments for domestic support ayments to an attorney for the	ort obligations, such as child	support and	
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Cre	editor's Nam	e					Mortgage
							Car
Niur	mher Street						=
Nur	mber Street						Credit card
_		State	Zin Code				Credit card Loan repaymen Suppliers or
Nur		State	Zip Code				Credit card Loan repaymen
City			Zip Code				Credit card Loan repaymen Suppliers or vendors Other Mortgage
City	y editor's Nam		Zip Code				Credit card Loan repaymen Suppliers or vendors Other Mortgage Car
City	у		Zip Code				Credit card  Loan repaymer  Suppliers or vendors  Other  Mortgage  Car  Credit card
City	y editor's Nam		Zip Code				Credit card Loan repaymen Suppliers or vendors Other Mortgage Car
City	y editor's Nam mber Street		Zip Code  Zip Code				Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment Suppliers or vendors
Cre	y editor's Nam mber Street	e					Credit card Loan repaymen Suppliers or vendors Other Mortgage Car Credit card Loan repaymen Suppliers or vendors Other
Cre	y editor's Nam mber Street	e State					Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment Suppliers or vendors
City	y editor's Nam mber Street	e State					Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment Suppliers or vendors Other Mortgage
City	y editor's Nam mber Street y	e State					Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment Car Credit card Loan repayment Car Loan repayment
City	y editor's Nam mber Street  y editor's Nam mber Street	e State					Credit card Loan repaymen Suppliers or vendors Other Mortgage Car Credit card Loan repaymen Suppliers or vendors Other Mortgage Car Credit card Loan repaymen Suppliers or vendors Other Mortgage Car

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Debtor 1	William First Name	E Middle Name		nes st Name	Case number (	if known)
Insid corp ager	lers include your relative orations of which you a	ousiness you operate as a	relatives of any rson in control, o	general partners; par r owner of 20% or mo	tnerships of which y ore of their voting se	
<b>✓</b>	No Yes. List all payments	to an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name					
	Number Street					
_	City Stat	te Zip Code				
	Insider's Name					
	Number Street					
	City Stat	te Zip Code				
insid Inclu	ler? de payments on debts No	guaranteed or cosigned b		payments or trans	fer any property o	n account of a debt that benefited an
Ц	res. List all payments	that benefited an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
						Include creditor's name
	Insider's Name			·		
	Number Street					
_	City Stat	te Zip Code				
	Insider's Name					
	Number Street					
	City Stat	te Zip Code				

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Deb	otor 1	William First Name	E Middle Name	Jones Last Name		Case number (if I	known)	
					_			
Par	t 4:	Identify Legal A	Actions, Repossessi	ons, and Foreclosure	S			
	List a			ere you a party in any lawsu small claims actions, divorce				
		No Yes. Fill in the detail:	S.					
			1	Nature of the case	Court or	agency		Status of the case
		Case title						Pending
					Court Nan	ne		On appeal
		Case number			NumberSt	reet		Concluded
					City	State	Zip Code	
		Case title						Pending
		-			Court Nan	ne		On appeal
		Case number			NumberSt	reet		Concluded
					City	State	Zip Code	
	✓	No. Go to line 11. Yes. Fill in the infor	mation below.	Describe the prope	erty		Date	Value of the
		Internal Revenue S	Service	bi-weekly garnishme	nt of \$223		11/2016	property \$223
		Creditor's Name						
		P.O. Box 7346 Number Street		Explain what happe	ened			
		Trainboi Guidot		Property was re	possessed.			
				Property was for				
		Philadelphia City	Pennsylvania 19101 State Zip Code	Property was ga		or loviod		
		City	State Zip Code	Describe the prope	· · · · · · · · · · · · · · · · · · ·	, or levieu.	Date	Value of the
								property
		Creditor's Name		_				
		Number Street		Explain what happe	ened			
		NUMBER SHEEL		Property was re	possessed.			
		_		Property was for				
				Property was ga				
		City	State Zip Code	Property was att	ached, seized,	, or levied.		

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Debte	or 1	William First Name	E Middle Name	Jones Last Name	Case number (if known)		
			filed for bankruptcy, did an e a payment because you o		ank or financial institution, s	et off any amou	nts from your
	<b>✓</b>	No Yes. Fill in the details.					
				Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account n	umber: XXXX-		
		City Sta	te Zip Code				
			led for bankruptcy, was any odian, or another official?	of your property in the p	oossession of an assignee fo	or the benefit of	creditors, a court-
	<b>✓</b>	No Yes					
Part			and Contributions				
13.	Wi	thin 2 years before you No	ı filed for bankruptcy, did yo	ou give any gifts with a to	otal value of more than \$600	per person?	
		Yes. Fill in the details fo		<b>5</b>		<b>5</b>	
		Gifts with a total value per person	e or more than \$600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You G	ave the Gift				
		Number Street					
		City Sta Person's relationship to	·				
		Person to Whom You G	ave the Gift				
		Number Street					
		City Sta Person's relationship to	·				

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Deb	tor 1	William First Name	E Middle Name	Jones Last Name	Case number (if known)		
14.			for bankruptcy, did y	you give any gifts or contribu	itions with a total value of	more than \$600 t	o any charity?
	뇓	No Yes. Fill in the details for each	ob aift or contribution				
	Ш	Gifts or contributions to		Describe what you contr	ihuted	Date you	Value
		that total more than \$600	Citatiues	Describe what you conti	ibuteu	contributed	value
		Charity's Name					
		Number Street					
		City State	Zip Code				
Part	6:	List Certain Losses					
15.		nin 1 year before you filed f abling? No Yes. Fill in the details.	or bankruptcy or sin	ce you filed for bankruptcy, d	id you lose anything beca	use of theft, fire,	other disaster, or
		Describe the property you how the loss occurred	ı lost and	Describe any insurance of Include the amount that inspending insurance claims of A/B: Property.	urance has paid. List	Date of your loss	Value of property lost
	abo	ut seeking bankruptcy or p	reparing a bankrupto	ou or anyone else acting on y by petition? credit counseling agencies for s			,,,
				Description and value of transferred	any property	Date payment or transfer was made	Amount of payment
		LAW FIRM		Attorney's Fee - 350.00		11/9/2016	\$350.00
		Person Who Was Paid					<del></del>
		1444 N. Farnsworth Avenue Number Street					
		Suite 300					
			COFOE				
		Aurora Illinois City State	60505 Zip Code				
		Email or website address					
		Person Who Made the Payn	nent, if Not You				
			,				
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		Email or website address	· .				
		Person Who Made the Payn	nent, if Not You				

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Deb	tor 1	William	Е	Jones	Case number (if known)	
		First Name	Middle Name	Last Name		
17.	help	o you deal with your credito not include any payment or trai No	rs or to make payments	s to your creditors?	behalf pay or transfer any property to any	yone who promised to
	Ш	Yes. Fill in the details.				
				Description and value of any transferred	property Date payment or transfer was made	Amount of payment
		Person Who Was Paid				
		Number Street				
		City State	Zip Code			
		Oity Otato	Zip Godo			
	Inclu	ordinary course of your busue both outright transfers and sfers that you have already list  No  Yes. Fill in the details.	d transfers made as secu		curity interest or mortgage on your property).	Do not include gifts and
				Description and value of any property transferred	Describe any property or payments received or debts pain exchange	Date aid transfer was made
		Person Who Received Trans	sfer			
		Number Street				
		City State Person's relationship to you	Zip Code			
		Person Who Received Trans	sfer			
		Number Street				
		City State Person's relationship to you	Zip Code			
19.		hin 10 years before you file ese are often called asset-prof		ou transfer any property to a se	elf-settled trust or similar device of which	you are a beneficiary?
		No Yes. Fill in the details.				
	_			Description and value of the	e property transferred	Date transfer was made
		Name of trust				

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Debto	r 1	William First Name	E Middle Name		nes st Name	Case	e number (if known)		
Part 8		List Certain Financial Acc				it Boxes, and	d Storage Units		
<b>20. \</b> r	With nov	hin 1 year before you filed for bayed, or transferred? ude checking, savings, money man peratives, associations, and other for	ankruptcy, wer	e any financi	al accounts o	r instruments h	neld in your name, or	-	
[	<b>✓</b>	No Yes. Fill in the details.		Last 4 di number	gits of accou	nt Type of instrun	f account or nent	Date account was closed, sold, moved, or	Last balance before closing or transfer
		Person Who Was Paid  Number Street		XXXX-		San	ecking vings ney market okerage	transferred	
		City State  Person Who Was Paid  Number Street	Zip Code	XXXX-		Sav	ecking vings ney market		
21. [	ο ν	City State	Zip Code	efore vou file	d for bankrup	Bro	okerage ner	epository for secur	ities. cash. or
		er valuables?  No Yes. Fill in the details.		·	ad access to		Describe the con		Do you still have it?
		Name of Financial Institution  Number Street		Name Number S City	treet State	Zip Code			☐ No ☐ Yes
22. H	_	e you stored property in a stora	Zip Code ge unit or plac	e other than	your home w	ithin 1 year bef	ore you filed for bank	kruptcy?	
L		Yes. Fill in the details.		Who else h	ad access to	it?	Describe the con	tents	Do you still have it?
		Name of Storage Facility  Number Street			treet	70			☐ No ☐ Yes
		City State 2	Zip Code	City	State	Zip Code			

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btor 1		Jones				
	First Name Middle Name	Last Na	ame			
rt 9:	<b>Identify Property You Hold or Cont</b>	rol for Someor	ne Else			
	you hold or control any property that some	one else owns? Inc	clude any	property you b	orrowed from, are storing for, or hold i	n trust for
SOI	meone.					
7	l No					
È	Yes. Fill in the details.					
	165. Till ill the details.	Matter and the state of			Describe the contents	Malara
		Where is the p	property?		Describe the contents	Value
	N					
	Owner's Name	Number Street				
	Number Street	-				
	Number Street					
		C:t.	Otata	7:- 0		
		City	State	Zip Code		
	City State Zip Code					
	•					
t 10:	Give Details About Environmenta	I Information				
r the	purpose of Part 10, the following definitions appl	v.				
ıuıC	parpose or rait to, the following definitions appl	у.				
	Environmental law means any federal, state, or le	-		• .		
	hazardous or toxic substances, wastes, or mater		-	. •		
į	including statutes or regulations controlling the c	eleanup of these subs	stances, wa	astes, or materia	āl.	
	Site means any location, facility, or property as de	efined under any envi	ironmental l	aw, whether you	now own, operate, or utilize it	
(	or used to own, operate, or utilize it, including dis	sposal sites.		•		
_	Hazardaya matarial maana anything an anyirang		a hazarda	awaata bazard	aua aubatanaa	
	Hazardous material means anything an environm			s waste, hazard	ous substance,	
	Hazardous material means anything an environm toxic substance, hazardous material, pollutant, c			s waste, hazard	ous substance,	
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. Hav	William		E	Jones	Case numb	er (if known)	
. Hav	First Name		Middle Name	Last Name			
	e you been a party	in any judici	al or administr	rative proceeding under ar	y environmental law	? Include settlements and orders	S.
$\overline{\mathbf{V}}$	No						
	Yes. Fill in the deta	ls.					
				Court or agency	Nat	ure of the case	Status of the case
	Case title						Danding
				Court Name			Pending
				-			On appeal
	Case number			Number Street			Concluded
				City State	Zip Code		
rt 11:	Give Details A	bout Your	Business o	r Connections to Any	Business		
	Olvo Dotalio / L	bout loui		Toomisonone to 7mg	240111000		
. With	nin 4 years before	you filed for I	ankruptcy, die	d you own a business or h	ave any of the followi	ng connections to any business	?
	A colo propriet	or or colf ompl	avad in a trada	profession or other activity	oithar full time or part t	timo	
			-	<ul><li>profession, or other activity,</li><li>or limited liability partnersh</li></ul>		ume	
	=	-	company (LLC	) or imited liability partnersh	ıp (LLP)		
	A partner in a p	•	ina avaautiva at	f a comparation			
		-	ing executive of	ty securities of a corporation			
	An owner or at	ieasi 5% oi in	e voung or equi	ly securilles of a corporation			
<b>✓</b>	No. None of the abo	ve applies. Go	to Part 12.				
	Yes. Check all that a	apply above ar	d fill in the detai	ils below for each business.			
				Describe the nature	e of the business	Employer Identification n	
						include Social Security nu	ımber or ITIN.
	B No.					EIN:	
	Business Name						
	Number Street					Dates business existed	
	Namber Street			Name of accountar	nt or bookkeeper		
	City	State	Zip Code			From To	
	J,		_p				
				Describe the nature	of the business	Employer Identification n	umbor Do not
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	Number Street			Name of accountar	nt or hookkeener	Dates business existed	
						From To	
	City	State	Zip Code			FromTo	<u></u>
				Describe the nature	e of the business	Employer Identification n	
						include Social Security nu	ımber or ITIN.
				_		EIN:	ımber or ITIN.
	Business Name			_		_	ımber or ITIN.
				_		_	ımber or ITIN.
	Business Name  Number Street			Name of accountar	nt or bookkeeper	EIN:	imber or ITIN.
	Number Street	State	Zip Code	Name of accountar	nt or bookkeeper	EIN:	
		State	Zip Code	Name of accountar	nt or bookkeeper	EIN:  Dates business existed	
				Describe the nature	e of the business		

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Deb		William	E	Jones	Case number (if known)
		First Name	Middle Name	Last Name	
28.		nin 2 years before you filed fo litors, or other parties.	or bankruptcy, did you g	give a financial statement to	anyone about your business? Include all financial institutions,
	$ \checkmark $	No Yes. Fill in the details below.			
	ш	res. I ill ill the details below.		Date issued	
		Name		MM/DD/YYYY	
		Number Street			
		City State	Zip Code		
Part	12:	Sign Below			
1	true a	and correct. I understand that	t making a false statem	ent, concealing property, o	and I declare under penalty of perjury that the answers are r obtaining money or property by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		/s/ William Jone	es	*	
		Signature of Debto			Signature of Debtor 2
		Date 11/11/2016			Date 11/11/2016
ı	Did y	ou attach additional pages to	Your Statement of Fir	nancial Affairs for Individua	ls Filing for Bankruptcy (Official Form 107)?
ı	V	lo			
i		és			
ı	Did y	ou pay or agree to pay some	one who is not an attor	ney to help you fill out bank	cruptcy forms?
ı	V	lo			
İ	Y	es. Name of person			Attach the Bankruptcy Petition Preparer's Notice,

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B 203 (12/94)

In

#### **UNITED STATES BANKRUPTCY COURT**

#### **Northern District of Illinois**

re	William E Jones ; Spouse	Case No.						
_	Debtor		(If known)					
		Chapter	Chapter 13					
	DISCLOSURE OF COMPENSAT	ION OF ATTORNEY FOR	DEBTOR					
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) that compensation paid to me within one year before the services rendered or to be rendered on behalf of the debt is as follows:	filing of the petition in bankruptcy, or agre	ed to be paid to me, for					
	For legal services, I have agreed to accept		\$4,000.00					
	Prior to the filing of this statement I have received							
	Balance Due		\$3,650.00					
2.	The source of the compensation paid to me was:							
	Debtor Other (sp	pecify)						
3.	The source of the compensation paid to me is:							
	✓ Debtor ☐ Other (sp	pecify)						
4.	I have not agreed to share the above-disclosed components and associates of my law firm.	pensation with any other person unless the	ey are					
	I have agreed to share the above-disclosed compensation members or associates of my law firm. A copy of the the people sharing in the compensation, is attached.							
5.	In return for the above-disclosed fee, I have agreed to re a. Analysis of the debtor's financial situation, and ren bankruptcy;		· · ·					
	b. Preparation and filing of any petition, schedules, s	statements of affairs and plan which may b	pe required;					
	c. Representation of the debtor at the meeting of cree	ditors and confirmation hearing, and any a	djourned hearings thereof;					
	d. Representation of the debtor in adversary proceed	dings and other contested bankruptcy matt	ters;					
6.	By agreement with the debtor(s), the above-disclosed fee	does not include the following services:						
	CEDI	TFICATION						
	I certify that the foregoing is a complete statement of any		n me for representation					
	ne debtor(s) in this bankruptcy proceedings.	agreement or arrangement for payment to	The for representation					
	11/11/2016	/s/ Mary E.R. Walters						
	Date	Signature of Attorney						
		Semrad Law Firm						
		Name of law firm						

B 203 (12/94)

#### **UNITED STATES BANKRUPTCY COURT**

#### **Northern District of Illinois**

re	William E Jones ; Spous	se	Case No.						
_	Debtor			(If known)					
			Chapter	Chapter 13					
	DISCLOSURE OF	COMPENSATION	ON OF ATTORNEY	FOR DEBTOR					
1.	Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf	year before the filing of th	e petition in bankruptcy, or agreed	I to be paid to me, for services					
	For legal services, I have agreed to a	ccept		\$4,000.00					
	Prior to the filing of this statement I	have received		\$350.00					
	Balance Due			\$3,650.00					
2.	The source of the compensation paid	d to me was:							
	<b>✓</b> Debtor	Other (specif	y)						
3.	The source of the compensation paid	d to me is:	·						
	<b>✓</b> Debtor	Other (specif	y)						
4.	I have not agreed to share the ab members and associates of my l		ion with any other person unless t	hey are					
		w firm. A copy of the agree	with a other person or persons wh ment, together with a list of the na						
5.	<ol> <li>In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:         <ul> <li>Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petitio bankruptcy;</li> </ul> </li> </ol>								
	b. Preparation and filing of any	petition, schedules, staten	nents of affairs and plan which ma	y be required;					
	c. Representation of the debtor	at the meeting of creditors	s and confirmation hearing, and an	ny adjourned hearings thereof;					
	d. Representation of the debtor	in adversary proceedings	and other contested bankruptcy m	natters;					
6.	By agreement with the debtor(s), the	above-disclosed fee does	not include the following services	:					
		CERTIF	CATION						
	certify that the foregoing is a completor(s) in this bankruptcy proceedings.	te statement of any agreen	nent or arrangement for payment to	o me for representation of the					
	11/9/2016		/s/ Mary E.R. Walters						
	Date		Signature of Attorney						
			Semrad Law Firm						
			Name of law firm						



### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.



6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76



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3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 11/9/2016

Signed:

/s/ William Jones

Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

ttorney for Debtor(s) /

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

+		total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Jones, William E ; Spouse	Case No		
	Debtor(s)	0000 110.		
		Chapter.	Chapter13	
	VERIFICATION	N OF CREDITOR MAT	RIX	
	The above named Debtors hereby verify that the a	attached list of creditors is tru	e and correct to the best of their knowledg	је.
Date:	11/11/2016	/s/ Jones, Willia	m E	
		Jones, William		
		Signature of De	btor	
		/s/ Spouse		
		Spouse		
		Signature of Joi	nt Debtor	

WFDS PO BOX 19657 IRVINE , CA 92623

ACS/COLLEGE LOAN CORP 10000 W Charleston Blvd Ste 200 Las Vegas , NV 89135

SPRINGLEAF FINANCIAL S 601 NW second street Evansville , IN 47708

MILITARY STAR 3911 S WALTON WALKER BLV DALLAS , TX 75265

PIONEERMCB 4000 S EASTERN AVE STE 3 LAS VEGAS , NV 89119

USAA SVG BK 10750 MC DERMOTT SAN ANTONIO , TX 78288

PORTFOLIO RC 120 Corporate Boulevard Norfolk , VA 23502

Zingo Cash 200 Fairway Drive Vernon Hills , IL 60061

LVNV FUNDING LLC 544 Mulberry St Ste 800 Macon , GA 31201

Blitt & Gaines 661 Glenn Ave Wheeling , IL 60090

CRDT FIRST PO Box 8134 Cleveland , OH 44188 MSDHS/METSS 750 NORTH STATE ST JACKSON, MS 39202

GENESIS BC/CELTIC BANK 9 PARKWAY CTR STE 190 PITTSBURGH , PA 15220

MID AMERICA BANK & TRU P.O Box 89937 Sioux Falls , SD 57109

CB INDIGO Po Box 4477 Bankcard Services Beaverton , OR 97076

FIRST PREMIER BANK PO Box 7999 c/o Stephen Dirksen Saint Cloud, MN 56302

Greenline Loans PO Box 507 Hays , MT 59527

Big Picture Loans P.O. Box 704 Watersmeet , MI 49969

MaxLend P.O Box 639 Parshall, ND 58770

Spotloan P.O. Box 927 Palatine , IL 60078

CreditBox.com, L.L.C. 800 Lee Street Suite 300 Des Plaines , IL 60016

Client Services Inc 3451 Harry S. Truman Blvd. Saint Charles, MO 63301 Internal Revenue Service PO Box 7346 Philadelphia , PA 19101

Illinois Dept of Revenue Illinois Department of Revenue P.O. Box 64338 Chicago , IL 60664

BankPlus 3100 N. State Street Jackson, MS 39216

Illinois Department of Human & Family Services 509 S. 6th St. Springfield , IL 62701

Magee, Donna L 118 Easterling Brimage Dr Mendenhall , MS 39114

American Water PO Box 94551 Palatine, IL 60094

Mississippi Department of Human Services Po Box 23094 MDHS/SDU Jackson , MS 39225 Case 16-35977 Doc 1 Filed 11/11/16 Entered 11/11/16 09:43:30 Desc Main Document Page 72 of 77

Debtor 1 William First Name	E Middle Name	Jones	Case number (ff known)	·
	uestions for Reporting Purpos	Last Name Ses		
16. What kind of debts do you have?	16a. Are your debts primar "incurred by an individed No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primar	rily consumer debts? lual primarily for a pers rily business debts? <i>E</i> or investment or throu	Bonal, family, or househ Business debts are debt gh the operation of the	s that you incurred to obtain business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	□ No. t □ Yes.	iter 7. Do vou estimate th	nat after any exempt prop to distribute to unsecured	erty is excluded and administrative d creditors?
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,0 5,001-10 10,001-2	,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000,0 \$50,000,0	01-\$10 million 001-\$50 million 001-\$100 million ,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?  Part 7: Sign Below	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000,0 \$50,000,0	01-\$10 million 001-\$50 million 001-\$100 million ,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
For you	I have examined this petition,	and I declare under pe	nalty of periury that the	e information provided is true and
	If I have chosen to file under Coof title 11, United States Code under Chapter 7.  If no attorney represents me arout this document, I have obta I request relief in accordance will understand making a false state.	Chapter 7, I am aware to a I understand the relied I did not pay or agrained and read the not with the chapter of title atement, concealing pages can result in fine	hat I may proceed, if elief available under each ee to pay someone who ice required by 11 U.S. 11, United States Cod	gible, under Chapter 7, 11,12, or 13 chapter, and I choose to proceed o is not an attorney to help me fill C. § 342(b).
	/s/ William Jones / William Jones Signature of Debtor 1	Monte of the second	Signature of Deb	otor 2
	Executed on11/9/2018 My/DI	D/YYYY	Executed on	MM / DD / YYYY

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		Doci	iment Page /	'3 of //	•
Fill in this info	rmation to identify your o	2900			
Debtor 1	William				
202101	First Name	E Middle Name	Jones Last Name	<del></del>	
Debtor 2			Last Hame		,
(Spouse, if filing)	First Name	Middle Name	Last Name	<del></del>	
United States I	Bankruptcy Court for the:	Northern	District of Illinois		
Case number			(State)		
(if known)				<del></del> }	
Official	Form 106De	)C			Check if this is an amended filing
Declarat	ion About an	Individual Debt	or's Schedule	S	12/15
		er, both are equally respon			12/15
Part 1: Sign	Below				
Did you pa	ay or agree to pay some	one who is NOT an attorne	ey to help you fill out ban	krubtev forms?	ana tina keesan an en en an antara de la companya d
<b></b> No					White the same of
☐ Yes N	Name of person				
☐ ·····		<del></del>	Attach Bankruptcy Signature (Official F	Petition Preparer's Notice, Declaration, and	· ·
			,		
					:
Under pen that they a	alty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules filed	with this declaration and	The second secon
🗶 /s/ Willian	m Jones ///		40		
Signature of		<del></del>	Signature	of Debtor 2	
			Juliature	THE LEGICAL	1

MM/DD/YYYY

page 1

Date 11/9/2016 MM/DD/YY)

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	First Name	E AMERICAN AND AME	Jones	Case number (it known)
		Middle Name	Last Name	2M dan constraint the charge part this late to constraint of the state
28. Wit cre	hin 2 years before you fil ditors, or other parties.	ed for bankruptcy, did	you give a financial state	nent to anyone about your business? Include all financial institution
V	No			•
	Yes. Fill in the details be	elow.		
			Date issued	Services
	Name		MM/DD/YYYY	_
	Number Street		<del></del>	•
	City State	e Zip Code	<u> </u>	
	•	zip code		
Part 12:	Sign Below			
			arement, conceaning prof	erry, or obtaining money or property by fraud in connection with
a ban	<b>★</b> /s/ William	Jones Jones	, or imprisonment for up t	erty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
a ban	<b>*</b>	Jones Jones	, or imprisonment for up t	o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
a dan	<b>★</b> /s/ William	Jones Johns Jones	, or imprisonment for up t	20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	/s/ William Signature of D Date 11/9/20	Jones	, or haprisonment for up t	Signature of Debtor 2
	/s/ William Signature of D  Date 11/9/20  ou attach additional page	Jones	, or haprisonment for up t	Signature of Debtor 2  Date 11/9/2016
<b>Did y</b> o	/s/ William Signature of D  Date 11/9/20  ou attach additional page	Jones	, or haprisonment for up t	Signature of Debtor 2  Date 11/9/2016
Did yo	/s/ William Signature of D  Date 11/9/20  ou attach additional page o	Jones	, or haprisonment for up t	Signature of Debtor 2  Date 11/9/2016  Date Bankruptcy (Official Form 107)?
Did yo	/s/William Signature of D Date 11/9/20 ou attach additional page o es	Jones	f Financial Affairs for Indiv	Signature of Debtor 2  Date 11/9/2016  Date Signature for Bankruptcy (Official Form 107)?

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# UNITED STATES BANKRUPTCY COURT Northern District of Illinois

In re:	Jones, William E ; Spouse  Debtor(s)	Case No	
	,,	Chapter.	Chapter13
	VERIFICA	TION OF CREDITOR MAT	RIX
Th knowledge	ne above named Debtors hereby verify the	nat the attached list of creditors is tru	ue and correct to the best of their
Date:	11/9/2016	/s/ Jones, William	E William)
		Jones, William E Signature of Debt	or Jon

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Deb	tor 1	William First Name	E	Jones	Case number (if known)	
16		***************************************	Middle Name	Last Name		
10.		culate the median family inco		Follow these steps	e e e e e e e e e e e e e e e e e e e	Annes de la contractiva del la contractiva del la contractiva de la contractiva de la contractiva del la contractiva de la contractiva de la contractiva del la contr
eli-mai granda		a. Fill in the state in which you live		llinois		
	16	b. Fill in the number of people in y	your household.	2		
	16	c. Fill in the median family income	e for your state and size o	f		\$65,659.00
		household	onarata in stanction of the	To find	a list of applicable median income amounts, go online	. 440,000.00
17.	Ho	w do the lines compare?	eparate instructions for th	is form. This list ma	a list of applicable median income amounts, go online ay also be available at the bankruptcy clerk's office.	
	178	Line 15b is less than or equiunder 11 U.S.C. § 1325(b)	ual to line 16c. On the to (3). <b>Go to Part 3.</b> Do NO	o of page 1 of this OT fill out <i>Calculatio</i>	form, check box 1, Disposable income is not determined on of Disposable Income (Official Form 122C-2).	
	17t	. Line 15b is more than line	16c. On the top of page Part 3 and fill out Calc	of this form, chec	ck box 2, Disposable income is determined under 11 able Income (Official Form 122C-2). On line 39 of that	
Part		Calculate Your Commitme		J.S.C. §1325(b)	(4)	
18.		y your total average monthly in				\$10,709.47
19.	con	duct the marital adjustment if it in the marital adjustment period under 11 U.S.C.	t applies. If you are marr § 1325(b)(4) allows you	ied, your spouse is to deduct part of yo	not filing with you, and you contend that calculating the our spouse's income, copy the amount from line 13.	<u> </u>
	19a	. If the marital adjustment does no	ot apply, fill in 0 on line 1	9a.		-\$0.00
	19b	. Subtract line 19a from line 18	B.			\$10.700.47
20.	Cal	culate your current monthly inc	come for the year. Follow	w these steps:		\$10,709.47
		. Copy line 19b.		·		\$10,709.47
		Multiply by 12 (the number of m	onths in a year).	•	•	
	20b	. The result is your current month	ly income for the year for	this part of the forr	n.	<b>x 12</b> \$128,513.64
	20c.	Copy the median family income	for your state and size of	household from lin	ne 16c.	\$65,659.00
21.		do the lines compare?			•	400,000.00
		Line 20b is less than line 20c. Un commitment period is 3 years: Go	less otherwise ordered by to Part 4.	the court, on the t	top of page 1 of this form, check box 3, The	A Company of the Comp
	图	Line 20b is more than or equal to 4, <i>The commitment period is 5 ye</i>	line 20c. Unless otherwisears. Go to Part 4.	se ordered by the o	ourt, on the top of page 1 of this form, check box	A A A A A A A A A A A A A A A A A A A
Part 4		ign Below		•		учучучанавана предостава
			/			
	t	By signing here, I declare under pe	enalty of perjury that the i	nformation on this	statement and in any attachments is true and correct.	
		X /s/ William Jones	Men /	· <b>x</b>		
		Signature of Debtor 1	1	Si	gnature of Debtor 2	av-remanda.
		Date 11/9/2016	//	Da	ate	Armity very market
		MM/DD/YYYY			MM/DD/YYYY	manian way
	 	f you checked 17a, do NOT fill ou	t or file Form 122C-2.			rannatiaww
	a	i you checked 175, till out Form 1 bove.	22C-2 and file it with this	form. On line 39 o	of that form, copy your current monthly income from line	14
	li li a	MM/DD/YYYY	t or file Form 122C-2. 22C-2 and file it with this	Da s form. On line 39 o	· · · · · · · · · · · · · · · · · · ·	14

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Debtor 1 William First Name	E Middle Name	Jones Last Name	Case number (if known)	
Part 4: Sign Below				
By signing here, under penalty of	of parjury you declare that the	e information on this statem	ent and in any attachments is true and correct.	ananananananananananananananananananan
X /s/ William Jones	llean	_ / x		
Signature of Debtor 1		=Się	gnature of Debtor 2	<del></del>
Date 11/9/2016 MM/DD/YYYY		Da		
			MM/DD/YYYY	